

# GENDER ANALYSIS & ASSESSMENT USAID/CAMBODIA

**Volume I: Gender Analysis** 

March, 2006

This publication was produced for review by the United States Agency for International Development. It was prepared by DevTech Systems, Inc.

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## **ACRONYMS**

ACILS American Center for International Labor Solidarity

ADB Asian Development Bank
ADR Alternative Dispute Resolution

ADS USAID Automated Directives System

CDHS Cambodian Demographic and Health Survey

CEDAW Convention on the Elimination of All Forms of Discrimination against

Women

CFAC Community Forestry Alliance for Cambodia

CSES Cambodia Socio-Economic Survey

CTO USAID project officer (Cognizant Technical Officer)

DAC Disability Action Council

DFID/UK Department for International Development/ United Kingdom

EMIS Education Management Information System

ESCUP Education Support to Children of Underserved Populations

ESP Education Strategic Plan

ESSP Education Sector Support Program

EU European Union

EWMI East-West Management Institute
FHI Family Health International
FSN Foreign Service National

GAD-C Gender and Development - Cambodia

GDP Gross Domestic Product HEF Health Equity Funds

I/NGO International Non-Governmental Organization

IDP Internally Displaced Person
ILO International Labor Organization

IWID Investing in Women in Development fellowship program

JICA Japan International Cooperation Agency
KAP Knowledge, Attitudes, and Practices survey

KHANA Khmer HIV/AIDS NGO Alliance

LICADHO Cambodian League for the Promotion and Defense of Human

Rights

MDG Millennium Development Goals

MDG-C Millennium Development Goals - Cambodia MoEYS Ministry of Education, Youth, and Sports

MoH Ministry of Health

MoWA Ministry of Women Affairs

MoWVA Ministry of Women and Veteran Affairs (former name of MoWA)

NCHADS National Center for HIV/AIDS, Dermatology, and STD

NDI National Democratic InstituteNGO Non-Governmental OrganizationNPRS National Poverty Reduction Strategy

ORT Oral Re-Hydration Treatment
OVC Orphans and Vulnerable Children

PMP Program Management Plan

PRK People's Republic of Kampuchea PSI Population Services International

Racha Reproductive and Child Health Alliance

RfA Request for Assistance RfP Request for Proposal

RGC Royal Government of Cambodia

RHAC Reproductive Health Association of Cambodia

SO Strategic Objective

STD Sexually Transmitted Disease

TB C-DOTS Tuberculosis Community Directly Observed Treatment Short-course

TBA Traditional Birth Attendant

TVET Technical and Vocational Education and Training

UNDP United Nations Development Program

UNICEF United Nations Children's Fund

UNIFEM United Nations Development Fund for Women

UNFPA United Nations Population Fund

UNTAC United Nations Transitional Authority in Cambodia
USAID United States Agency for International Development

WfP Women for Prosperity

## **EXECUTIVE SUMMARY**

The Gender Analysis and Assessment developed for USAID/Cambodia draws on two principal sources of information. It began with a review of documents on gender issues in Cambodia, from the USAID Mission, other donors and non-governmental organizations (NGOs), and the government. In particular, it builds on the 2004 in-depth cross-sector analysis, *A Fair Share for Women: Cambodia Gender Assessment*, prepared by UNIFEM with a coalition of donors and the Ministry of Women's Affairs. The report also draws on insights gleaned by the assessment team during two weeks of interviews and meetings in Cambodia in later October 2005, with government officials, donors, NGOs, project implementers, and commune councilors. The report is in two volumes, the Gender Analysis, and the Gender Assessment for USAID/Cambodia.

## Volume 1: GENDER ANALYSIS

As Cambodia moves through the tentative process of recovery from the decades of violence and unrest, traditional gender roles and relationships are challenged and subject to constant change. In terms of policy and legal frameworks, efforts to promote gender equality and women's human rights appear to be gaining momentum. At the same time, socio-cultural norms and a culture of impunity continue to undermine implementation and enforcement. Cambodian society remains largely patriarchal and hierarchical, with strong traditional norms that assign higher status to men and marginalize women who are not married. Disparities between men and women in resources, decision-making power, and aspects of basic social well-being, coupled with widespread poverty stand as significant constraints to sustainable economic and social development.

The devastation of the past is reflected in a continuing population imbalance, whereby women make up approximately 52% of the population of 13.8 million. About half of the population is under the age of 20, as a result of a baby boom in the 1980s. Eighty percent of the population lives in rural areas and earns their living from farming. Poverty levels are highest among this group. Forty percent of the rural population and 10% of the urban population are classified as poor.

Unlike most other countries, workforce participation for men and women is nearly equal. On average, women contribute more than half of the household income. Over half (53%) of economically active women, compared to 32% of economically active men, are classified as "unpaid family labor," primarily in agriculture. Women preside over a fourth of Cambodian households. Female household heads are more likely than male household heads to work in agriculture, but tend to have smaller landholdings and to be more vulnerable to losing their land. Few Cambodian farmers have access to extension services, credit, or high quality inputs, but women in farming tend to be even more isolated than men because of constraints on mobility and time, and exclusion from male-dominated community networks.

Outside of agriculture, women work in the informal sector, particularly in commercial activities. The garment industry provides the principal source of formal sector employment for women, but young women are employed there only as workers with almost no opportunities to move into supervisory or management positions. Formal sector employment opportunities for men also are very limited, but men are found in a broader range of jobs than women, and in both the private sector and government, supervisory and management positions are dominated by men.

#### Health

Demographic statistics in Cambodia, including life expectancy, maternal and infant mortality rates, and rates of malnutrition and stunting are among the least satisfactory in Southeast Asia. The HIV prevalence rate is the highest in Asia. The statistics reflect the confluence of inadequate health services, poverty, and the roles, resources, and power of men and women.

Among health providers, the public health service is plagued by inadequate compensation, minimal standards of performance, lack of accountability, and difficulty in staffing rural centers. Private health services are provided by people with a range of knowledge, charges, and standards. Access to health services in rural areas is limited.

Traditional roles dictate that women are responsible for household management and care, while men are responsible for income generation. This division of labor makes it difficult for women to leave the house and the village to seek health services; it also means that the burden of care for household members who are ill falls on adult women and their daughters. Lack of knowledge about the physical body, and distrust of professional providers also deter both men and women from using professional services. Women may be even less informed than men because of differences in education and less frequent contact outside the local area. Even with information, however, women may not be in a position to act, since they usually must defer to their husbands in decisions about spending household funds. Although wives reportedly manage the funds for household expenditures, husbands set priorities and decide when and how the money is allocated.

A disparity exists between men and women in the norms of sexual behavior, whereby women are expected to be monogamous in marriage and to abstain from sex before marriage, while there is a general acceptance of "informal" polygamy and patronage of brothels among married and unmarried men. This distinction has affected the spread of HIV/AIDS from high risk groups, (prostitutes and their clients), into the general population. Women in long-term relationships now comprise a high risk population for contracting the virus, with married women making up close to 50% of new cases. New strategies for countering the disease seek to confront this disparity by focusing on the behavior of married couples. There also is an increased focus on effective delivery of services for prevention as well as treatment, care, and support.

The high maternal and infant mortality rates, as well as continuing high incidence of infectious diseases like tuberculosis and malaria, reflect the poverty of the rural population as well as lack of health services. The constraints women face in access to prenatal and antenatal services have broad ramifications for women and their infants. Poor nutrition and increased vulnerability to disease, as well as problems in sanitation and food preparation are part of the complex of factors reflected in high maternal and infant mortality rates and low life expectancies. Statistics show that men and women use health services in equal numbers, despite the greater needs of women, as childbearers.

#### Education

Education for All and equality for boys and girls are international and national goals. A significant gender gap in terms of girls' schooling exists in Cambodia, increasing in size at each stage from primary school to university, and greater in rural than in urban areas. While recent reforms have resulted in equality in primary school enrolment, girls drop out earlier and in greater number than boys. The inadequacies of the school system and the constraints of poverty on schooling affect both boys and girls. Girls, however, face additional constraints, such as problems of transport, security, and household responsibilities, so that achieving the needed reforms in the system as a whole, without attention to gender-specific constraints will not be successful in erasing the gender gap.

Because of the growing mandate for an educated and skilled workforce, vocational and technical training, workforce training outside the classroom, and non-formal basic education are increasing in importance. In the past, girls have been minority participants in these programs, suggesting that concrete actions will be needed to ensure that girls/women as well as boys/men acquire education and training and are able to convert them into employment.

## Governance

Improving political and economic governance addresses impediments to democratic, economic, and social development. Good governance affects not just political elections and what government does but also the private sector and civil society.

Corruption in Cambodia is ubiquitous and pernicious. The impact of corruption on women (and the poor) is particularly difficult in situations where there is a lack of transparency in the allocation of resources, and in delivery of services. While both men and women are victims of corruption, women are more frequently forced to pay bribes, to speed up or secure services, because they are responsible for household management, including schooling and health care for family members.

Cambodia has a reasonable framework of national legislation and international conventions upholding human rights, but implementation and enforcement of these frameworks are flawed. Knowledge about legal rights is low among both men and women. Lack of awareness as well as women's relative lack of power increase their vulnerability to exploitation and abuse. Further, a culture of

impunity tends to protect perpetrators rather than victims of violence, corruption, and abuse.

Human rights and access to justice are overlapping concerns in Cambodia. Barriers to justice include cost, language, distance to courts, and a lack of lawyers, as well as problems of bias, political patronage, and abuse of power. Women's access to justice is particularly problematic. Not only do women often lack resources, mobility, and knowledge of their rights, but there is a fundamental difference in bargaining positions, due to women's traditionally lower status. Further, most cases are heard by village chiefs and commune councils, and resolved through reconciliation, in situations where women's lower status is magnified.

Trafficking of women and children is a major human rights concern in Cambodia, a sending, receiving and transit country. Traffickers are able to operate because of inefficient law enforcement, and problems of corruption and discrimination. Trafficking is a complex issue that requires response on multiple fronts: economic, social, legal, and judicial. The usual focus is on the supply side; increasingly, attention also is being given to curbing the demand, and to developing agreements for safe and legal migration.

Decentralization through the transfer of authority and responsibility from the central government to the commune councils is a strategy for deepening democratic process, and strengthening participatory development through better service delivery. Positioned at the local level and with increasing representation by and for women's rights, commune councils signify an important intersection of decentralization and gender in Cambodia. Success in increased involvement of women in elective office at the local level has not yet translated into strong political representation at the national level, however, where only 11.5% of representatives in the national assembly are women. In anticipation of the 2008 national elections, a number of NGOs are involved in training and work with political party members to overcome personal and systemic constraints for women seeking election.

Natural resources governance is a great challenge in Cambodia. Growing landlessness and near-landlessness, combined with diminishing access to common property resources are increasing poverty and jeopardizing the food security of rural households, especially for women. Loss of land and of access to natural resources undermine coping mechanisms on which women depend to bridge gaps in income and compensate for transitory food shortages.

There is significant confusion about land tenure. In spite of the new Land Law in 2001, the confusion and cost associated with certifying ownership rights has had a negative impact on women's land rights, especially for female-headed households.

Governance also is a factor in economic competitiveness. Economic growth through increased investment and private sector development is a prerequisite

for combating poverty. Corruption and lack of transparency are leading factors inhibiting Cambodia's ability to attract investment. Another factor is the general inadequacy of public institutions to provide the physical, legal, and social infrastructure to make investment feasible. A third factor is the low level of knowledge and skills of the Cambodian workforce.

While growth is a necessary condition, growth alone will not eliminate the underlying inequalities in Cambodian society that reinforce and are perpetuated by poverty. Differences and inequalities between men and women in employment can easily be accentuated by macroeconomic and trade policies that attract industries that affect men and women differently. Gender analysis of macroeconomic impacts, as well as actions to ensure equity in education, training, and employment opportunity are necessary to avoid reinforcing debilitating inequalities.

## **Cross-cutting Factors**

The gender analysis also identifies two issues that cut across sectors. First, gender disparities in health, education, or access to land or employment cannot be understood or countered in isolation. The disparities in education affect and in turn are affected by health problems and access to health services or information. Poverty due to landlessness or lack of employment options feeds back upon inequalities in education and health. A holistic approach, where insights and tools are shared across sectors, is required to correct these inequalities.

Second, a pervasive problem encountered throughout the analysis is the issue of gender-based violence, which is fed by the violent past and the inferior status of women compared to men, but which also serves to reinforce this inferior status and exacerbate all of the other inequalities discussed in the analysis. Little attention has been given to this issue, but with the recent passage of the Law on the Prevention of Domestic Violence and the Protection of Victims an opportunity exists to give additional visibility and solutions to this pernicious issue that cross-cuts all aspects of gender relations.

# Volume 2: GENDER ASSESSMENT FOR USAID/CAMBODIA

Gender analysis is a methodology for examining social situations through a "gender lens." The Gender Assessment uses the analysis to examine the USAID/Cambodia portfolio, to highlight gender integration in on-going activities and suggest potential avenues to strengthen gender mainstreaming in the future.

USAID/Cambodia is beginning the implementation of its new strategy for 2005-2010. The focus of this strategy is good health, good education, and good governance. Health and Education are existing programs; Governance is a new cross-cutting program that focuses on improved political and economic governance. The strategy also identifies three cross-cutting themes:

transparency and access to information; linkages among USAID-funded partners; and, gender mainstreaming.

USAID worldwide has a mandate for gender integration in all programs and has specified a series of requirements to achieve this integration throughout the programming process. From the point of view of USAID development activities, the concern with gender integration is summarized in two key factors: the impact of gender relationships on program results, and on the impact of the program on the relative status of men and women.

Attention to gender relations is important in the current USAID/Cambodia portfolio, in part as a result of two characteristics. First, a high proportion of the current program is implemented through international and local non-governmental organizations, which are strong practitioners and advocates of gender mainstreaming in their activities. These programs have developed approaches to gender integration that can be shared among partners and that may provide guidance for new projects.

A second important factor for gender integration in the USAID portfolio is the extent to which the program is implemented at the grassroots level. The impact of gender often is more apparent at this level than in projects that focus on institutional and policy level results. The challenge for USAID will be to design mechanisms to transfer lessons learned from the grassroots programs to the new programs in governance.

Several promising practices in current programs are identified as useful guides in future programming. These include activities linked to gender that have developed into cross-cutting activities in health and education programming. Another concerns the extent to which gender awareness training is being integrated into sectoral training activities, with both men and women participating in the training. A recent experience in project design that cited gender concerns throughout the Request for Assistance document, included criteria about gender integration in the proposal evaluation, and now is using these concerns in the project workplan, is an example of the process recommended to ensure that gender considerations are an integral part of the project as a whole.

A shift in HIV/AIDS programming, with increasing attention to men and women in stable relationships has focused attention on intra-household gender relations and the ways in which gender roles and relationships affect the spread of the disease and the impact of the disease on individuals, communities, and the society as a whole. These same insights increasingly are reflected in programming in maternal, child and reproductive health, where the male/female decision-making units rather than the individual men and women are the focus of attention.

The challenge in future programming for USAID/Cambodia is to develop methods to transfer the lessons from the effective programming at the household

and community levels to new activities in the area of political and economic governance. At the policy and institutional level steps need to be taken to ensure that gender analysis is incorporated into the design of these activities in the same way it has been applied to the delivery of social services. Several examples are provided of potential issues related to gender in the new program areas, as well as concrete recommendations of steps to formalize the gender mainstreaming process for the Mission. Specific recommendations are provided for each program area related to key gender issues and steps toward confronting these issues.

## INTRODUCTION

# Purpose and Approach of the Study

The Strategic Plan for 2005-2010 for the United States Agency for International Development Mission in Cambodia (USAID/Cambodia) focuses on three central goals: good health, good education, and good governance. The Strategy Statement views gender as a cross-cutting theme to be addressed in all programs and activities, stating that "mainstreaming gender throughout our Strategic Objectives is the best approach."

In October 2005, a team of consultants undertook research to explore opportunities and constraints for mainstreaming gender in the context of Cambodia. Gender assessments provide an overview of key gender issues, and recommendations about how the Mission may deal with these issues and achieve greater gender integration into its programs. It focuses on two main factors: the impact of gender relations on program results, and the impact of the program on the status of women. Applying a "gender lens" to current program areas and activities, the main objective of this study is to highlight how gender can strengthen common activities across strategic objectives (SOs) by identifying: lessons learned, promising practices, possible trends, and new entry points for ongoing and future projects and activities.

This assessment was developed following two weeks of research in Cambodia and careful review and analysis of relevant documents from the Mission, other donors, and the Royal Government of Cambodia (RGC). In April 2004, an indepth cross-sector gender assessment *A Fair Share for Women: Cambodia Gender Assessment* was produced through a collaborative effort between the RGC and the United Nations Fund for Women (UNIFEM), the World Bank, Asian Development Bank (ADB), the United Nations Development Program (UNDP), and the British Department for International Development (DFID/UK). This report builds on the excellent analysis done in *A Fair Share for Women*, drawing from its findings and updating data with more recently available information.

Interviews were conducted with government officials, donors, non-governmental organizations (NGOs), union organizers, project implementers, and commune councilors. The team included: Virginia Lambert from Washington, D.C. and Charla Britt, from Monterey, CA; two local consultants based in Cambodia, Prok Vanny and Susan Hagadorn; and two USAID/Cambodia Mission staff, Darlene Foote, (Investing in Women in Development (IWID) Fellow and Monitoring, Evaluation, and Gender Specialist, and Sar Sovannary, Administrative Assistant to the Mission Director.

The team gratefully acknowledges the collaboration of Mission staff, and numerous other individuals who generously offered time and information. Mission Director, Jonathan Addleton, and Program Officer, Pam Foster-Ojajuni,

deserve special mention for the support they provided in "lending" two Mission staff members to the team.

This report is presented in two volumes. Volume 1, "The Gender Analysis," analyzes gender in the context of Cambodia and in relation to the scope of the strategy focus. Volume 2, "The Gender Assessment for USAID/Cambodia," assesses current USAID program areas, identifying approaches and practices as well as key findings and recommendations for future programs and activity design.

The Scope of Work for this assessment is attached as Annex A to this report. Annex B identifies the people consulted and interviewed. Annex C offers a bibliography of the documents and background materials reviewed.

## **GENDER ANALYSIS**

## 1. Gender relations: from Failed State to Fragile Recovery<sup>1</sup>

# **History and Context**

From the golden age of Angkor to the tragedy of the killing fields, Cambodian history inspires both awe and despair. Cambodia is a post-conflict country struggling to establish a market economy and build a democratic political system. The last decade has been relatively stable, but the legacy of more than 30 years of violence, conflict, and strife continues to have severe long-term impacts on gender relations in Cambodia.

In the 1960s the Vietnam War spilled into Cambodia. Despite attempts to remain neutral, the country's strategic position in the center of Southeast Asia made it a frontline state in a bad neighborhood. Decades of war and civil unrest followed. Cambodians suffered clandestine military operations by the North Vietnamese and the Viet Cong, carpet bombing by American B-52s, genocide and forced relocation under the Khmer Rouge regime, large-scale migration to refugee camps and other countries, invasion and occupation by Vietnam, and guerrilla attacks by the defeated Khmer Rouge and their allies (which continued into the late 1990s).

These tragic events affected women and men differently. During the Khmer Rouge's 42-month reign of terror (1975-1979), an estimated one to three million people (out of a total population of 7.3 million in 1975) died from murder, disease, or starvation. Approximately 200,000 people were executed without trial. Urban populations were driven into the countryside to establish a collective agricultural system. Families were broken up. Children were separated from their parents. Mass weddings forced young men and women into matrimony at random. Civil servants, teachers, doctors, and other mostly male professionals were targeted for execution as enemies of the State. While both men and women were mobilized in the war, women combatants tended to serve in the rear areas and were less likely to be killed. Many more men died than women. In the immediate aftermath of the war, and throughout much of the 1980s, women comprised 60 to 65% of the adult population.

In December of 1978, after a series of battles with the Khmer Rouge, the Vietnamese army pushed into Cambodia and took control over Phnom Penh. The defeated Khmer Rouge fled toward the Thai border and into remote jungles. With the Vietnamese came Hun Sen and other breakaway members of the Khmer Rouge, who opposed Pol Pot's regime. They formed a new government, the People's Republic of Kampuchea (PRK). Some Cambodians joined the new government, and engaged in reconstruction efforts. Others, however, fought the "occupation" using guerilla warfare tactics. Up to a million refugees and

<sup>&</sup>lt;sup>1</sup> This section draws heavily on information and figures from the following sources: UNIFEM (March 2004); McGrew et al (March 2004); and Hicks (July 2004).

internally displaced people (IDPs) fled to camps along the Thai-Cambodia border, where they remained for more than 10 years.

The tragic events between 1970 and 1979, the onset of Vietnamese-backed socialist rule, and the protracted civil unrest which followed, created hardships for both men and women. But it also created new opportunities. Men had been mobilized to fight, or killed by the Khmer Rouge. Women were the majority population. They became the backbone of the economy and were promoted by the PRK communist party into decision-making positions. In the camps along the Thai border, women refugees and IDPs were also actively engaged. They were encouraged to take part in income-generation and other skills-building training courses in the camps. International agencies and NGOs ran the administration of the camps, and they encouraged the participation and empowerment of women. Furthermore, the camps harbored different resistance groups and nascent civil society organizations, which later formed into political parties and NGOs (including women and human rights NGOs).

These experiences positioned women to engage more fully in the economic and political opportunities created by the peace settlement, and the arrival of an interim governing authority – the United Nations Transitional Authority in Cambodia (UNTAC). After several years of negotiation, the internationally mediated Paris Peace Accords were signed in 1991. This established UNTAC, giving it a mandate to preserve the peace agreement and hold "free and fair" multi-party elections. It was one of the United Nation's largest ever experiments in nation-building.

UNTAC remained in Cambodia from 1992 to 1999, with mixed results.<sup>2</sup> Elections were held, and the UN presence did support the growth of a civil society and democratic values. Women were encouraged to participate in the workforce, and hired in large numbers by UNTAC and other international organizations.<sup>3</sup> But political tensions continued to flare, and UNTAC failed to ensure women's participation in political negotiations or consider gender issues as key to political reconciliation efforts. Moreover, there was an exponential growth in prostitution and the spread of HIV/AIDS fueled by the arrival of some 24,000 international peacekeepers.

However, as a recent report (March 2004) emphasizes, UNTAC created democratic space for multiple voices to be raised, including "new social spaces" for women (McGrew et al, 2004). Women's groups played an instrumental role as a calming force for nonviolence in the face of political tensions and revenge killings that nearly derailed the 1993 election process. Women groups and NGOs took on influential leadership roles in areas of human rights, gender-based

<sup>&</sup>lt;sup>2</sup> It had a large presence from 1992 to 1993, followed by a small UN political mission headed by the Special Representative of the Secretary-General for Cambodia from 1993 to 1999, and a Special Rapporteur for Human Rights and UN Office of the Higher Commissioner for Human Rights from 1993. (McGrew et al, 2004).

<sup>3</sup> This was especially true in the election division, which hired the largest numbers of staff. In addition, the human rights component taught human rights, specifically women's rights, across Cambodia and made efforts to be gender sensitive in its training (McGrew et al, 2004).

violence, peace, and development. They were also influential in the drafting of Cambodia's constitution in 1993, and policies and legislation supporting women's human rights (e.g., the Law on the Prevention of Domestic Violence and the Protection of Victims, the Land Law). Challenges remain, however, in enforcing these laws and the Constitution, and in ensuring equal opportunities for women in relations with their family members, in the workforce, and in governance-related positions within the civil service, the judiciary, and in political bodies.

## 1.1 Institutional Context

On paper, efforts to promote gender equality and women's human rights in Cambodia appear to be gaining momentum. There has been progress in legal frameworks that protect human rights, policies that promote the integration of gender issues into strategic national planning processes, and support for increasing women's political participation in democratic decentralization. However, socio-cultural norms and a culture of impunity continue to undermine the implementation and the enforcement of legislation and policy provisions, and many initiatives appear to be donor-driven, raising questions about political will and future sustainability. More effort is needed to strengthen the enforcement capability of the country's judicial and administrative agencies, if gender equality in basic rights is to be achieved.

# Legal Frameworks

The Cambodian constitution of 1993 provides for social, economic, and political equality of men and women before the law. This commitment is also reinforced by Cambodia's ratification of the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) in 1992, and its signing of the "Platform for Action" agreed at the 1995 Fourth World Conference on Women in Beijing.

Additional legal strides have been made with national legislation. The 1997 Labor Code recognizes gender-specific concerns and affords liberal rights to women in employment, inheritance laws, and to counter human trafficking. The Marriage and Family Law allows divorce on grounds of "cruelty and beatings" and recognizes joint property rights. The new Land Law of 2001 specifies that women and men have the right to co-sign land titles. The Law on the Prevention of Domestic Violence and the Protection of Victims, in formulation since 1996, was passed and signed into law in 2005. A counter-trafficking law has been drafted and is widely expected to be passed and ratified in 2006. Anti-corruption legislation, first drafted by the United Nations in 1993 also is expected to pass in 2006.

These documents provide national frameworks and legal provisions for guaranteeing equality and the protection of women's human rights, collectively suggesting that important steps are being taken toward guaranteeing equality and justice. However, critics argue that in practice the government has done little to address the political and socioeconomic discrimination faced by women.

## **Decentralization and Political Participation**

Democratic decentralization in Cambodia has begun with the development of commune councils. Cambodia is administratively divided into villages, communes, and provinces. In February 2002, the practice of appointing commune chiefs was replaced with direct elections for councils at the commune level.

Commune Council elections are a strategy to extend democratic process to the countryside, where 85% of Cambodians live. The main duties of councils in commune affairs include: maintenance of security and public order, service delivery (water, sanitation, road construction and repair, health services, education, and waste management), social and economic development projects, environmental protection, dispute resolution, and otherwise responding to the needs of the citizens (Mansfield and MacLeod, 2004).

In the 2002 Commune Council elections, 5,527 women candidates ran for office. Of this number 954 women were elected to councilor positions – or 8% of the total of 11,261 representatives in the 1,621 councils across the country.<sup>4</sup> Although the numbers of women represented in the commune councils (as in other levels of government) are low, there is evidence that their presence is making a difference in terms of raising issues that more specifically address the needs and interests of women.

# National Policies, Strategic Planning and the Ministry of Women's Affairs

The Ministry of Women's Affairs (MoWA), which was elevated from a department to a ministry only in 1998, is responsible for mainstreaming gender and providing a platform for women's rights. The principal activities of MoWA are: influencing national development strategies, influencing sectoral (line ministry) and donor strategies, and implementing projects.

In February 1999, the Ministry developed its first five-year plan, *Neary Rattanak* (which translates as "women are precious gems"), to mainstream gender in other ministries. This was updated in 2003. A new proposal for "future directions" focuses on five broad objectives: (1) poverty reduction for women and veterans; (2) integration of demobilized soldiers and their families; (3) promotion of good governance, decentralization, and deconcentration; (4) judicial reform; and (5) implementation of administrative reform and promotion of women in decision-making.

MoWA has actively participated in the crafting of several national development strategies, including the National Poverty Reduction Strategy (NPRS), the Millennium Development Goals for Cambodia (MDG-C), and the Governance Action Plan.<sup>5</sup> It also works with sectoral ministries to integrate gender issues into their programs.

<sup>&</sup>lt;sup>4</sup> Only 34 women were elected to the position of commune chief (3.5 percent), with a slightly larger number elected as first deputy (55), and second deputy (78).

<sup>&</sup>lt;sup>5</sup> The Governance Action Plan (2001) includes five cross-cutting areas: the judiciary and legal systems, public finance, civil service, anti-corruption, and gender equity. Initially, there were just four cross-cutting areas

MoWA has established gender focal points in other ministries, and introduced gender budgeting to track allocations of resources between the needs of men and women. Though there is still a long way to go to mainstream gender in the line ministries, the MoWA has made some headway. One problem is that the majority of line ministries confuse a focus on women with gender. As a result, gender is widely regarded as an "issue" which falls under the mandate of the MoWA, rather than as a cross-cutting concern. To change this mind-set, MoWA with UNDP assistance has hired six national consultants (based at MoWA) who provide guidance and support for mainstreaming gender within individual ministries.

Problems remain, however, especially in terms of budgeting and priorities, and the inadequate collection and reporting of key information. These shortcomings make it difficult to assess the extent to which strategic plans respond adequately to the needs of the intended beneficiaries. There are also questions about political will to make changes happen. Some critics argue that the government pays lip service to gender to please donors, but resists substantive actions that would result in real change.

#### NGOs and Donors

NGOs continue to play an important role in the promotion of gender equality as advocates, activists, trainers, and researchers. An estimated 24 Cambodian and 31 international NGOs focus specifically on women's and gender issues. In addition to offering gender training in the field, a number of organizations are also conducting gender audits, which examine gender integration within their programs and staff.

Most international donors have a policy to mainstream gender in their work, but implementation is uneven. A few key donors recognize the need for structural changes, with the mainstreaming of gender into national policies backed by funding and capacity-building to implement real changes. The Senior Policy and Management Advisor for the MoWA's Partnership for Gender Equity Phase II, Elaine McKay, cites the Asian Development Bank as the international organization that has most effectively mainstreamed gender. Other organizations are following suit. Most recently, CARE and Pact have conducted organizational gender analyses. The CARE analysis focused on gender equity and diversity in order to be more effective at advancing social justice and equity in its work. Pact examined ways of mainstreaming gender in terms of staff, policies, and programs, to become a better role model and encourage subgrantees to sensitize their staff and address gender balance.

identified for reform. Gender Equity was added as a fifth component, following strong recommendations from the donor community and NGOs (UNIFEM 2004).

<sup>&</sup>lt;sup>6</sup> These donors include: ADB, UNDP, the Japan International Cooperation Agency (JICA), and the World Bank (UNIFEM 2004).

<sup>&</sup>lt;sup>7</sup> Pers. comm., October 2005.

## 2. Key Issues and Gender-based Constraints

## 2.1 Post-Conflict Dynamics

Gender relations in Cambodia are in flux. Gender differs from sex in that it is socially constructed, as opposed to biologically determined. Gender roles are assigned to men and women in early socialization, and change over time. In conflict and post-conflict societies, the pace of change often accelerates. New roles are thrust on both men and women as a matter of necessity. This change has consequences for gender relations. Shifts in gender norms and the breakdown in social barriers can be beneficial or detrimental to gender equality and women's human rights. Crises can provide opportunities for the reconstruction of a more just and equitable society, or result in a retrenchment of traditions that discriminate against women.

In Cambodia, as in other post-conflict societies, the boundaries of gender norms are being contested. Economic, social, and political developments have opened up new opportunities, challenging gender roles and introducing new choices and options – especially for women and girls. However, Cambodian society remains largely patriarchal and hierarchical, with strong traditional norms that continue to assign higher status to men and marginalize women who are not married.

# Gender and Post-Conflict Dynamics<sup>8</sup>

- Disruption and destruction of social networks/families
- Change in population balance and structure
- Division of labor in flux, including new skills and new jobs for women
- Gender equality secondary to concerns for peace and stability
- Impact of mine accidents and war on men and women, and rehabilitation problems and post-traumatic stress
- Increase in the levels of gender-based violence

More than 30 years of strife have torn families apart, and broken down social networks and other forms of social capital that create a basis for mutual support and cooperation. One example of the effect of residual amounts of distrust may be the dearth of micro-credit programs, which have been successful in other parts of Asia. A report by the USAID Center for Development Information and Evaluation (USAID 2000) notes that micro-credit programs have had a difficult time taking off in Cambodia. The average group size for micro-credit groups are comparatively small, with no more than three to five participants, and usually limited to immediate family members. The report comments on a lack of willingness to help others in need, and attributes this attitude, in part, to

<sup>8</sup> Adapted from UNDP (n.d.).

Cambodia's history. Other implications of Cambodia's history of conflict are changes in the balance of population as well as increases in gender-based violence.

Another consequence has been a change in the division of labor. Economic development has brought new opportunities for employment, but these gains have meant losses (perceived or real) for others. Traditional norms see Cambodian men as the breadwinners for their families, with women responsible for childcare and managing the household. However, women are engaging in a broad range of tasks, including those normally associated with men. Recently, more paid employment opportunities have gone to women than to men. For example, in the garment industry, 90% of the workers are female.

Men's under-employment and loss of economic power juxtaposed with a relative increase in women's economic power is viewed by some men as a violation of gender norms, affecting relations between men and women. Though poorly understood, these changes have potentially serious social impacts, including an increase in gender-based violence. Alcohol, poverty, gambling, family squabbles, lack of education and political/social unrest are strongly associated with domestic violence. But the underlying traditional norms and social beliefs about the subservient role and status of women, and a history of the use of violence to "solve" conflict, perpetuate more violence.

Some reports suggest that violence against women in Cambodia is increasing. The Cambodia Demographic and Health Survey (CDHS, 2000) found that one of four married or previously married females (23%) aged 15-49 reported having experienced physical violence. A disturbing aspect of violence is Cambodia is the extent to which it is considered acceptable, with women tolerating and even rationalizing a certain level of abuse. One of three women believes that a husband beating his wife is justifiable. Men and women say that hitting a wife is acceptable, if she is not seriously injured. Most women have little choice. Two of five women would have no one to turn to financially if they were to leave an abusive relationship. In a participatory poverty assessment undertaken by the ADB (2001), 76% of participants believed that "much more domestic violence occurs now than in the past."

Because women continue to be a target of discrimination, many programs appear to concentrate on women's human rights and women's empowerment. However, as *A Fair Share for Women* (UNIFEM, 2004) points out, male gender issues also need to be considered. It asks: What are the changing roles and identities for men? How are changes in the labor market and social structures affecting men? How do risky behavior, crime and violence, occupational injury, HIV/AIDS, and substance abuse affect men's human capital? At issue is building a better understanding of *how men can be involved in transforming the gender disparities and inequalities that currently privilege them*.

<sup>&</sup>lt;sup>9</sup> This occurred in both urban and rural environments, though incidences diminish among women with secondary school education and among those residing with or near their parents.

# 2.2 Gender Disparities

# Poverty, Population, and Family Structures

Cambodia's social indicators are among the worst in Asia. Its population stands at 13.8 million, 52% of whom are women (National Institute of Statistics 2004). Life expectancy is in the mid-50s, with women out-living men by almost 4 years. A baby boom in the 1980s resulted in a population bulge. About half of the population is under the age of 20 – they are now entering the workforce and their reproductive lives.

The World Bank estimates Cambodia's annual per capita income at around \$300 (World Bank 2002). The poverty rate is 36%, with 10% in urban areas and 40% in rural areas. Poverty is experienced by both men and women. However, evidence suggests that gender impacts this experience. Poverty is greater among Cambodian women than among men in all economic groups; women have fewer resources, decreased access to healthcare and education, and less food security.

On average, women contribute more than half of the household income. In addition to their largely unpaid farm work, they typically do extra work to earn cash income for their families. Women dominate in open air markets as sellers of produce or vendors. They also make handicrafts – woven mats, brooms, and cotton or silk *kramas* or *sampots* – which are sold for income

Approximately 80% of the population lives in rural areas and earns their living from farming. The highest rates of poverty are found among farmers, and those households whose heads have little or no formal education. Sixty-five percent of the rural work force is women.

Within the household, women are responsible for agricultural production, household management, childcare, and care for the elderly. Women generally make the day-to-day domestic expenditure decisions, but men make most of the household decisions on major purchases and sales. Women have limited control over resources, including land transactions, even when the titles are in both names. Less than one-third of women (28%) own an asset they could sell without their husband's permission.

Women preside over one-quarter of Cambodian households. Some are widows, while others are divorced or have been abandoned by their husbands. Women household heads are more likely to work in agriculture than men household heads. However, they tend to have smaller landholdings and are more vulnerable to losing their land and utilizing their children's labor.

Female-headed household may not benefit equally from development interventions, as they are often excluded from participation in programs and decision-making. Reasons for this exclusion include practical constraints on

women's mobility and time, as well as problems of exclusion from maledominated community networks or "friendship circles."

## Agriculture, Natural Resources, and Property Rights

Agriculture remains the backbone of the Cambodian economy, with 75% of the labor force earning their livelihood from farming. Rural women are responsible for 80% of food production, and more than 65% of women are farmers.

Nearly 80% of farmers are primarily engaged in subsistence agriculture. A little over half of the women (56%) engaged in agriculture are subsistence farmers. Women are more likely than men to be landless or have significantly smaller plots of land. The average rural landholding is one hectare, but in female-headed households this number dips to 0.5 hectare.

Few farmers have access to extension services, high quality inputs, credit, or information on farming techniques and markets. This is especially true for female farmers. Access to productive land and an accompanying land title is a critical issue. Land liberalization in 1989 (and the confusion that followed), negatively impacted women's land rights, particularly for female-headed households. Women are vulnerable in contractual affairs and land title ownership, especially newly widowed women and women heading households who are susceptible to claims being made on their land. They have little or no knowledge about land titles, plot sizes, tenure requirements, or new land laws. When claims are made, there is little legal aid for civil disputes, forcing women to pay for legal challenges themselves or accept informal community arbitration which is usually conducted by men. Women also are at the forefront of protests against land grabbing and illegal logging.

# Employment, Unemployment, and the Division of Labor

Cambodia has a rapidly growing workforce, with limited new employment opportunities.

The population "bulge" resulting from the baby boom of the 1980s is now entering the workforce at rate of about 150,000 each year, with an expected increase to 200,000 per year by 2010. The economy is not keeping pace with the demand for jobs, which could lead to frustration and social instability in the future. The paid employment market in Cambodia employs only 16% of the economically active population: 19% of men, and 14% of women. The majority of employed women work in the garment sector, which employs approximately 20% of women aged 18 to 25.

Women make up 52% of the workforce. Cambodia's female labor force participation rate, which is 82%, is the highest in the region. Women outnumber men in the labor force in all age groups from age 15 to 54, with the exception of those in the group age 25 to 29. On average (taking experience, age, and education into account statistically), men's wages are 33% higher than those of women. Men, more than women, are moving into a range of better-paid positions outside the agriculture sector. For women, options remain largely limited to the garment industry or the informal sector. Although women

dominate the workforce in the garment industry and are paid at least the official minimum wage, they are not in management positions. Also, with the advent of trade liberalization, the future of this sector is uncertain.

Over half (53%) of economically active women, as compared to 32% of economically active men, are classified as working in the unpaid family labor category and almost all of them are agricultural workers. The gender gap in unpaid family labor has decreased in recent years as the percentage of women has fallen, and the percentage of men in this category has increased.

The rural labor market in Cambodia is fragile and rapidly changing. When local conditions for employment are adequate, out-migration is low. When local demand for labor is small, out-migration is the only answer for unemployed workers. According to the 1998 Census, more than 80 percent of migrants were of working age (15-64). There were more women migrants than men in the 15 to 19 year-old age group, although for those aged 20-39, men were more likely to migrate than women.

Cambodian women are participating in the workforce and are equally responsible for earning a living and providing for their families, especially in poor households. This creates a double burden because women have a wider range of domestic and non-domestic roles than men, and tend to work longer hours.

Choices in employment for both men and women are shaped by their level of education. With a higher level of education, women can compete with men for employment. However, because women generally have lower education attainment, only a small number are in a position to compete. Persistent traditional attitudes towards girls' education and "appropriate" occupations for women and men also contribute to disparities in employment.

# 3. Gender in health, education and governance

The remainder of the Gender Analysis focuses on gender relations in three sectors, health education, and governance. These sectors correspond to the scope of the USAID Strategic Statement for 2005 to 2010. 10 A final short section concerns gender issues among persons with disabilities.

## 3.1 Health

"Access to basic health services is both a poverty and a gender issue in Cambodia....In Cambodia, medical utilization rates and spending on medical matters are more or less equal for men and women. However, women's health care needs are greater than men's when reproductive care is considered. Hence, equal utilization and spending rates indicate that women are having less of their health needs met than men."

<sup>&</sup>lt;sup>10</sup> The USAID/Cambodia Strategic Statement 2005-2010 is available on the USAID/Cambodia website, www.usaid.gov.kh.

A Fair Share for Women (UNIFEM, 2004)

Demographic statistics in Cambodia, including life expectancy, maternal and infant mortality rates, and rates of malnutrition and stunting are among the least satisfactory in Southeast Asia. The HIV prevalence rate of 1.9 percent reflects a decline from the 3.0 rate in 1997, but remains the highest in Asia. The Ministry of Health (MoH), donors, and NGOs have made strong investments toward improving the health care system, but significant challenges remain.

The intersection between poverty, and the roles, resources, and power of men and women is a key element in the design of strategies for the health sector. Multiple problems in the health system contribute to the disappointing demographic statistics. From one side, among health providers, the public health service is plagued by inadequate compensation, minimal standards of performance, lack of accountability, and difficulty in staffing rural centers. Private sector providers include local shopkeepers and traditional birth attendants as well as health center employees who supplement their meager public salary with private services. In some communities, NGOs also are direct service providers.

From the other side, individuals, particularly in rural areas, are often blocked from care because of lack of cash and frequently, because of ignorance and distrust as well. Illness in the rural household is a catastrophic event, often resulting in loss of assets like land, or termination of a child's schooling. The interaction of gender with these constraints is important to understanding the differences in the way women and men use and benefit from these services. Widespread rural poverty is the context for all decisions about use of services, and it affects everyone in the household. At the same time, at the margin, when decisions are made about expenditures on health care, women may be relatively disadvantaged. Because this disadvantage lies in the way gender roles are defined, women may remain disadvantaged even as economic conditions improve.

# Household roles and responsibilities

Traditional roles dictate that women are responsible for household management and care, while men are responsible for income generation. Husbands (and perhaps the women themselves) are reluctant for their wives to go to the health center and especially the hospital because the day-to-day life in the household is dependent on women. In addition, when a person goes to the referral hospital a family member must accompany the patient to help with care, like food, bathing, etc., which means the loss of two care providers from the home.

The cost of transport to public health facilities is a constraint for all family members. Women face the added concern about their security when they travel outside the village. Again, since women and girls usually do not travel alone, a woman's trip to the health center is relatively costly and a drain on the household workforce.

The wife's role in the household includes childrearing and care of family members. Serious illness affects the family financially, but it also adds to the woman's workload with the additional burden of care for the sick and often compensation for the loss of the labor of the ill person in other ways. The implications of the division of household responsibilities are broad, including concerns for the care of the wife when she becomes ill, the impact on a daughter's schooling if she is called upon to help her mother and the fate of the household when the husband becomes ill and dies.

# Knowledge and decision-making

Lack of knowledge about the physical body and health care, and distrust of professional providers also deter both men and women from using public health services. Women may be even less informed than men because of differences in education and less frequent contacts outside the local area. One of the clearest examples of the impact of lack of information is provided by breastfeeding practices. Data from the Cambodia Demographic and Health Survey (CDHS) in 2000 showed that while 96% of babies received breast milk, fewer than 18% were exclusively breastfed during the first two months and only a minority received breast milk immediately after birth (Walston 2005a). A Fair Share for Women (UNIFEM, 2004) notes that 88% of women practice "roasting" after birth, 11 and feed the newborn only sugar water for two or three days. These practices for newborns contribute to the high infant mortality rate in the country. The forthcoming data from the 2005 CDHS will be useful in assessing the effectiveness of the campaign during the last five years to increase women's knowledge about the importance of breastfeeding.

The fact that the majority of health service providers are men may present an additional barrier for women in terms of transfer of information about sensitive health topics. The type and quality of care from male providers may differ for women and men. In interviews, NGO practitioners also said rural women are sometimes uncomfortable with the midwives in the health centers, in comparison to the traditional birth attendants (TBAs) in the village, because they tend to be young and are outsiders to the community. Women also may turn to TBAs and shopkeepers for information and care because they can pay in kind rather than in cash. NGO field staff noted that the barriers to accessing public health services mean the health centers and hospitals tend to become the refuge when other options are exhausted. The reputation for poor services in public facilities because of gaps in the quality is magnified by the sense that these facilities are where a person goes to die.

Even with information, however, women may not be in a position to act, since they usually must defer to their husbands in decisions about spending household funds. Although women reportedly manage the funds for household expenditures, they are merely accountants. Their husbands set priorities and

<sup>&</sup>lt;sup>11</sup> "Roasting" is the practice of keeping the newly delivered mother in bed, wrapped in warm clothes, close to a fire or on a mat over a bed of warm coals for up to three days.

<sup>&</sup>lt;sup>12</sup> Conversely, access of men (and adolescents) to reproductive health services is affected by the traditional assumption that reproductive health and contraception are women's business.

decide when and how the money is allocated to costs like schooling, health care, land and agriculture.

#### Norms of sexual behavior

The HIV/AIDS epidemic and the spread of other sexually transmitted infections (STIs) have raised awareness of the importance of the norms of sexual behavior for men and women in the spread of disease. While women are expected to be monogamous in marriage and to abstain from sex until marriage, there is a general acceptance of a different standard for men. The practice of "informal" polygamy, through "sweetheart relationships, 13 and peer pressure to get drunk and visit a brothel for purposes of male bonding, contribute to men having multiple sex partners.

Adolescents may be especially at-risk for HIV/AIDS infection due to social denial of sexual activity among youth and the young people's lack of basic information about the body. Adolescent female garment workers from rural areas are especially vulnerable because of their naiveté, male assumptions that rural girls are more likely to be free of disease, and the need to supplement income, which may lead some to engage in sweetheart relationships or informal liaisons (Fordham 2003).

## 3.1.1 **HIV/AIDS**

The progress in reducing the HIV/AIDS prevalence rate since 1997 is attributed primarily to the success of efforts to combat the epidemic through a focus on transmission of the virus in high-risk groups. As the path of the epidemic shifts into the general population, new procedures are required to reduce transmission through trusted relationships. Expanding the target from specific sub-groups like brothel-based prostitutes, migrant workers, and male clients to prostitutes, including military and police, to the broader population has lead to explicit attention to the nature of the relationships between men and women, and the gender-based constraints that affect behavior. This trend toward increasing integration of gender considerations in the design of HIV/AIDS projects is reinforced by requirements for attention to gender to create an effective approach to the continuum of care for the HIV/AIDS affected population.

Women in long-term, stable relationships now comprise a high risk population for contracting HIV/AIDS, with married women making up close to 50% of new cases. The basis for this transition may lie in an embedded social contradiction. On the one hand, society tolerates married men engaging in extramarital affairs, while on the other hand, it is largely unacceptable for a wife or sweetheart to suggest condom use because this implies infidelity. According to a NCHADS/FHI survey (2001), 91.5% of married women never use a condom with their husbands. In a Knowledge, Attitudes and Practices Survey (Walston, 2005a) 87% of

<sup>&</sup>lt;sup>13</sup> In Cambodia, the term "sweetheart" is used to denote a range of relationships outside an existing marriage (for example, to describe a second marriage) that are not one-time commercial sex acts. (LICADHO, January 2006).

respondents agreed with the statement, "Suggesting condom use implies mistrust."

Population Services International (PSI) has initiated a social marketing campaign for condom use directed to married couples (and others in "trusted relationships.") The theme, "Dare for the one you love," is designed to counter the negative association between condom use and infidelity. The earlier intense and successful campaign for use of the Number 1 condom by prostitutes has been linked to two unanticipated consequences explained largely in terms of gender relations. First, the Number 1 condom has become associated with prostitutes and therefore many feel it should not be used by "respectable" women. The new social marketing campaign now includes new branding for that condom as a part of the OK products marketed to families.

Second, government closure of brothels, and the perception that HIV/AIDS is most likely to be contracted in a brothel have increased demand for sex services from young women working as karaoke singers, beer girls, and attendants in massage parlors. Because these young women are not organized, are not located in one place, and may not identify themselves as providing sex services, they are more difficult to reach for sentinel surveillance, prevention messages and services.

There is another carry over from the focus on high risk groups which affects the provision of treatment and support services. Blame is directed to prostitutes as the cause of the disease, and also to infected husbands and fathers who are scorned for bringing the virus into the community. The fear of stigma against HIV-positive women who bear children may deter women from accessing testing and services.

The continuum of care approach to the HIV/AIDS epidemic espoused by the National Center for HIV/AIDS, Dermatology, and STD (NCHADS) and supported by USAID, other donors and NGOs confronts the disease not only in terms of treatment, care, and support, but also prevention. Effective delivery of services in all these phases requires attention to barriers to care for men, women, and children, and the dynamics of intra-household and community relationships. Gender-based constraints to access to health services, the power imbalance between men and women, and household gender roles affect both the design of programs and the relative benefits.

Home-based care is a response to the isolation of people living with HIV/AIDS. It also is a mechanism to relieve some of the burden of care for women and girls. The multifaceted nature of the programs, which provide not only health-related care but also psychological and economic support, assistance in planning for the future, and continued support after the death of the family members, reflects an analysis of the impact of the disease for all household members. Several NGOs reported that this approach has increased their awareness of gender

<sup>&</sup>lt;sup>14</sup> Consistent condom use among prostitutes in brothels is estimated to be about 90 %.

relations and increased their incorporation of gender analysis in other programming as well.

NGOs report that in AIDS-affected households, girls are more likely than boys to be taken out of school to care for siblings, perform income generating activities, or do housework. Initiatives directed to keeping children from AIDS-affected households, orphans and vulnerable children (OVCs), in school must pay particular attention to girls. At the same time, orphaned girls are more easily placed with relatives or in foster homes than are boys, because they are more useful as laborers. Accordingly, they also are more vulnerable to abuse through excessive demands for work and less likely to be sent to school by the foster families.<sup>15</sup>

NGOs involved in delivery of home-based care services report that HIV/AIDS infected women and women living in AIDS-affected households are more likely than men to participate in programs for income generation, mutual support, and planning for the future particularly as it concerns welfare of the children. Microenterprise and credit programs in the villages are overwhelmingly filled by women. At the same time, men are more likely to hide their HIV status or to become depressed. These responses may be an extension of household roles. Men may find it difficult to cope when they are unable to fill their responsibility as breadwinner, while women seek out assistance to keep the household going and care for the children. A particular concern is the care and support of the woman when she becomes ill.

## 3.1.2 Infectious Diseases

Infectious diseases, especially tuberculosis and malaria, continue to be among the leading causes of death and morbidity in Cambodia. Estimates show that as many as two-thirds of the population may be infected with tuberculosis and the disease was responsible for 10,000 deaths in 2002. Deaths due to malaria have dropped dramatically since 1999, but it remains a significant risk in certain subregions and for young children. The principal gender concerns are the effect of gender roles and resources on access to health services for diagnosis and care, as well as the impact of these illnesses on roles and responsibilities within the household.

Vulnerability to debilitating illness and death from infectious diseases increases with poverty, malnutrition, and a general "run-down" state. *A Fair Share for Women* (UNIFEM, 2004) reports that the 2000 CDHS analysis of women's nutritional status found that about two-thirds of women of childbearing age (15-49 years) are stunted and/or suffering from iron-deficiency anemia. Poor nutrition results from a combination of lack of food and disease, which further depletes the body's nutrients. Women become run down during pregnancy and lactation, and if food is scarce, are unable to re-build their physical defenses.

<sup>&</sup>lt;sup>15</sup> In the case of OVCs, there is a probable link to trafficking of both girls and boys, for labor and for sex.

There is also some anecdotal evidence that, in scarcity, women defer food and other resources to men because men's work is seen as harder and vital to the family. Similarly, development organizations have contributed to malaria prevention through marketing and distribution of bed-nets, yet women are less likely than men to use mosquito nets, because wives allow their husbands to use a net when there are not enough available. Lack of education and knowledge also increases women's vulnerability relative to men's vulnerability.

Given these indications of potential differences in vulnerability to infectious disease, sex disaggregated data on the incidence of these diseases would be useful in refining the prevention and treatment protocols.

## 3.1.3 Maternal, child, and reproductive health and nutrition.

A Fair Share for Women (UNIFEM, 2004) cites a maternal mortality rate of 437 per 100,000 live births, based on the 2000 CDHS data. Data from the 2005 CDHS will be available in the near future, although other recent surveys (including the 2005 CSES) suggest little change during the last five years in maternal mortality.

In 2000, the contraceptive prevalence rate was 19% for modern methods with women living in urban areas and women with secondary education more likely to use modern contraception than women who live in rural areas or who have no education (CDHS).

The constraints women face in accessing prenatal and antenatal services have broad ramifications for both the women and their infants. For example, Walston (2005a) reports that five to ten percent of new HIV infections are due to mother to child transmission.

Poor nutrition and increased vulnerability to disease among women, as well as problems encountered in sanitation and food preparation are part of the complex of factors contributing to high maternal and infant mortality rates as well as low life expectancies. *A Fair Share for Women* (UNIFEM, 2004) reports that in 2000, only about a third of women delivered with the help of a skilled birth attendant and about 85 percent of children were born at home. Again, the forthcoming 2005 CDHS will be able to show whether the recent efforts to take health information, nutritional supplements, and medicines and other supplies to the villages rather than relying on visits to the health centers has had an impact on these statistics.

Practitioners also report an unmet demand for information and methods for birth spacing and contraception, with considerable differences between urban and rural areas. It is difficult to assess trends in this area until the new data are available. *A Fair Share for Women* (UNIFEM, 2004), with reference to a 2002 World Bank study, cites the use of traditional, dangerous methods to terminate pregnancy, often in private homes, as a major cause of maternal mortality in Cambodia.

## 3.1.4 Health Systems

The overlay of public and private health service providers, including NGOs active in communities throughout the country, commercial providers, and traditional community providers, offer a wide gradation in quality and cost of services. One of the characteristics of this system, as of other institutions in Cambodia, is lack of accountability. Accordingly, the system itself presents barriers to access and utilization of services, as well as to quality of services, which may differ for men and women.

While most of the focus has been on problems of access to health care, the capacity of the system to respond to patients' needs also is cited as a constraint. Improving services and responsiveness may involve in part increasing the capacity of traditional private sector providers. In the public health system, the relative absence of women professionals in the health centers and hospitals may make these places less approachable for village women. The absence of women at the policy and management levels of the Ministry of Health is likely to result, as in other countries, in less attention to concerns of women's health. Data systems that track the differences between men and women in demand for services and care provided also are important to assessing the impact of gender.

The difficulty in recruiting female health personnel in health centers and hospitals, particularly midwives, illustrates the linkages across sectors. Since few girls in remote rural areas attend secondary school, the pool of candidates to train as midwives (and teachers) is small. Outsiders without local ties are unwilling to move to remote areas because of fears of isolation and concerns about their physical security. NGO field staff also report increased difficulty in recruiting midwives because of concern about exposure to the HIV/AIDS virus.

# 3.1.5 Links to education and governance

As the delivery of health services and information has evolved from a condition-centered toward a more holistic approach to individuals, the scope of methods have expanded and incorporated activities in other sectors. Health providers are developing programs and curricula in schools to reach adolescents. Health clinics and training programs are operating in the garment factories, and health NGOs are operating micro-enterprise credit groups in villages for people living with HIV/AIDS and to generate a local savings account to help group members cover emergency medical expenses.

More broadly, health service providers are giving increased attention to networking and communication through support groups and peer educators, as well as training for the health committees of the commune councils and the development of Volunteer Community Health Groups. Radio programs and comic stage presentations are also being used to overcome the limitations of illiteracy and open up communications within the communities. These methods and communication channels are tools for increasing transparency and discussion generally.

A final concern is the importance of making a link between gender-based violence and health. At this point, health providers, including those involved with community outreach and home-based care do not explicitly take account of gender-based violence or its implications for women's health. When asked about the way in which gender-based violence affects their programs, or how they deal with it, most responded that they refer cases to the commune councils.

## 3.2 Education

The benefits of increasing girls' schooling and reducing the gender gap in education have been well documented worldwide and included in the global Millennium Development Goals and the strategies of Education for All. As discussed in *A Fair Share for Women* (UNIFEM 2004), a significant gender gap exists in Cambodia, increasing in size at each stage from primary school to university, and greater in rural than in urban areas. To understand this gap in Cambodia, it is important to put it within the context of the successes and shortcomings of the education system as a whole. An analysis of the interactions between gender considerations and the other factors reflected in the broad problems of relevance, quality, and access in the education system is more effective than a focus on factors related to girls' education alone.

Despite the virtual elimination of the education system during the Khmer Rouge era, the Ministry of Education, Youth and Sports (MoEYS) instituted an impressive Education Reform Program in 2000, which generated significant results in increased net primary enrolments and reduced repetition rates. By 2004, girls and boys were enrolling in primary schools at an overall rate of 91 %, with only a small difference between girls (90.7%) and boys (93.1%). The MoEYS database, the Education Management Information system (EMIS), of information collected from the schools shows steady or increasing net enrolment, although other recent surveys bring that finding into question. The EMIS data also showed a decline in repetition rates from 0.29 in 1996-7 to 0.11 in 2001-2 across demographic groups as a result of the reforms (Bredenberg 2003). For girls, the rate fell from 0.28 to 0.10, and for boys, from 0.29 to 0.11. Although enrolments and transition rates also improved at the lower secondary level, 2004 enrolments remained quite low (26.1%), but with an improving gender gap (24.8% girls and 27.3% boys).

Despite the initial successes and expectations for this reform the effectiveness waned after a couple of years. In 2004, the MoEYS adopted a new strategy and action plan that includes not only gender equity targets but attention to both the supply and demand factors underlying school enrolment and success. A recent multivariate analysis of the EMIS database by the World Bank (2005) provides additional insights for the interpretation of the enrolment rates and factors affecting progress in strengthening human capacity in Cambodia.

<sup>&</sup>lt;sup>16</sup> It is very difficult to verify the accuracy of the school-based EMIS data through comparisons to surveys because of differences in the base population, and in the questions asked. Information in the EMIS is gained from self-reporting by school staff. The less optimistic findings in other data also have raised questions about the coding in the EMIS of enrolments, drop outs, and repetition.

A primary factor in explaining high net enrolment rates but relatively low educational achievement is the prevalence of overage enrolment. Most children spend some time in school but significant numbers drop out before completing primary school. As one assessment states succinctly, "Most of the target population for lower secondary school (12-14 year olds) is actually attending primary school (90 percent), while most of the target population for upper secondary school (15-18 year olds) is actually in primary (53%) and lower secondary (37%)." (USAID, 2005) Overage enrolment is due principally to starting school late (at an average age of 8-9 years rather than the official age of six years), which is in part a response to late physical maturity of children. Late entry coupled with slow progress through the system means that approximately 75% of children who start school finish primary school (grade six) and only 52% complete basic education (grade nine). Poverty is the overriding explanatory factor in these rates, but gender differences also are significant. Girls drop out more often than boys, but boys more often repeat grades. Ultimately, 80% of boys complete sixth grade and 70% of girls reach this milestone.

The variables related to success in schooling for girls in Cambodia are similar to those encountered in other parts of the world. Most analysts agree that the gender gap in Cambodia is less a reflection of an attitude of rejection of schooling for girls than of the interaction between gender considerations and economic factors. While poverty and costs are the core explanation, the World Bank analysis also shows that girls' tenure and success in primary school tend to vary more than boys' behavior in response to conditions of the school such as lack of toilets, lack of female teachers as role models, and distance of school from home.

The costs of schooling are an immediate barrier for poor households. Although the reform eliminated all direct costs, indirect costs are not insignificant, and increase as the child moves through the system. As in the case of access to health services, for a poor family, when a choice must be made between investing in education for a son or daughter, the son is more likely to attend school. The constraints of actual costs are augmented by perceived opportunity costs. Opportunity costs generally seem to be higher for girls than for boys and to increase with age.

Most children in Cambodia, especially those in rural areas, work and contribute to household income and well-being. Although most work as unpaid family labor, boys are more likely to be engaged in productive work than girls, while girls usually have a heavier workload than boys overall because, like their mothers, they have household care responsibilities. The work burden not only contributes to late entry and poor attendance at school but also to low achievement and interrupted studies.

<sup>&</sup>lt;sup>17</sup> This negative attitude may be a factor in low rates of girls' school attendance among some of the minority populations of Cambodia. (K. Bredenberg, pers. comm)

The World Bank study shows that the trade-off between work and school is more lopsided for girls than for boys in the teen-age years and affects girls' drop out rate in primary school at grades five and six, and particularly girls' entry into secondary schools. Older girls leave school to care for their siblings, and increasingly, for paid employment. For this reason, late enrolment in school is more damaging to primary school completion rates for girls than for boys.

Perceived opportunity costs may be exacerbated for girls by the perception of the quality and relevance of the schooling. If the school experience is of poor quality or of questionable applicability to their lives, the balance between school and work at home may tip more easily for girls than for boys. According to the World Bank study, both girls and boys respond to school inputs like infrastructure, class size, and teacher quality, but girls' dropout behavior is more sensitive to these factors than boys'. A frequently cited school characteristic of particular importance to girls is the presence of water and latrines, which becomes more important as girls get older.

Problems related to educational quality, overall, are daunting. As primary school enrolments have increased, they have exceeded the capacity of the physical infrastructure of the system. Average class sizes of 50 to 70 students place serious constraints on teaching and learning. Many schools have adopted shift schedules with two or even three shifts per day, further increasing the pressure on the teachers.

The presence of female teachers is important to girls' schooling, both as role models and because they are likely to treat girls differently than male teachers. As civil service employees, teachers are paid a low salary. They must find additional sources of income to meet their basic needs. Elimited opportunities in rural areas, coupled with isolation and lack of support make it difficult to recruit teachers for remote areas, especially females.

The Ministry's efforts to upgrade the quality of the teaching staff by increasing the educational requirements from nine to 12 years of schooling to qualify for teacher training institutes, has further depleted the staff and has constrained recruitment of female teachers in rural schools. Since few girls in rural areas attend upper secondary school, there is a limited pool from which to draw these teachers. Training teachers from the community, who have a structure of support already in place, may be more successful than offering incentives to urban residents to move to the countryside.

Distance to school is frequently noted as a constraint to secondary school attendance both because of time lost and lack of transportation. This constraint is greater for girls because of security concerns, and potential additional costs for boarding if facilities are available. There also are concerns about security in the school. As girls mature, the risks for girls of gender-based violence in the schools

<sup>&</sup>lt;sup>18</sup> Average monthly salaries for teachers (approximately \$23-25) are reportedly about half the basic monthly wage of a garment factory line worker (\$45). Garment factory workers receive the legal minimum wage.

increase, relative both to teachers and to older male students. Likewise, young girls in the school may be uncomfortable with the older boys.

The explanation for the gender gap in education in Cambodia reflects a complex web of supply and demand factors. In general, the constraints girls face are the same as those faced by boys, although the relative magnitude varies. While the gender gap will not be closed through general, gender blind improvements in the schools, a direct focus only on girls will be ineffective as well, because girls, like boys, also are affected by the broad system constraints. An integrated approach to reform with explicit attention to gender differences as the reforms go forward and constant monitoring of the behavior of girls and boys seems most appropriate.

## 3.2.1 Basic Education

The five year strategy and program of the MoEYS, the Education Strategic Plan 2006-2010 (ESP 2005) and the Education Sector Support Program 2006-2010 (ESSP 2005) define 12 Priority Action Programs to (1) achieve universal enrolment and completion of primary education and move toward universal completion of nine years of basic education; (2) improve the quality of basic education and (3) link education and training to the needs of the labor market. The strategy carries an explicit commitment to equality, with a particular focus on overcoming the constraints of poverty, gender, and disability. Several program areas address major constraints for girls including the construction of new lower secondary schools to increase accessibility, and scholarships for girls to attend lower secondary school. The Gender Working Group within the Ministry developed a strategy to operationalize the designation of gender as a cross-cutting factor in the ESP, concerned with both the delivery of education services and gender mainstreaming in management and policy formulation. Donors and NGOs are providing coordinated support to the MoEYS in implementation of the program.<sup>19</sup>

# 3.2.2 Workforce Development

Attention to workforce development involves connecting education and training to the requirements of the labor market, moving a step beyond the life skills curriculum of the schools and traditional vocational education to anticipate the increasingly complex requirements of the changing economy and of employers. In Cambodia, the workforce participation of men and women is nearly equal, although the labor market tends to be quite segregated by sex. As the Cambodian economy expands and necessarily becomes more involved in the global economy, women and men both must be positioned to take advantage of emerging opportunities. Workforce-based education and training programs can be effective tools to challenge the traditional definitions of men's and women's work that limit options and mobility. Attention to the training curriculum, the selection of sites for training, and the recruitment of participants are important in breaking these barriers. In Cambodia, where a majority of the

<sup>&</sup>lt;sup>19</sup> The USAID education projects with the MoEYS for design and implementation of a more relevant curriculum and to increase access to school for underserved populations fit this model. In both cases, attention to increasing girls' tenure in school is required specifically as a part of project analysis and evaluation.

new jobs in the formal sector are filled by women, gender mainstreaming is key for both men and women.

Technical and Vocational Education and Training (TVET) has not been a high priority education program in Cambodia. Relatively few available facilities, most located in or near Phnom Penh, fragmented program management, and inadequate curricula and materials are cited as problems. Since 1998, with the support of donors, especially ILO and ADB, the number of schools has increased and several Provincial Training Centers have opened. In addition, the number of students has increased, and attention to training methods and materials, and course relevance has improved. A process of involving business and industry representatives in the selection and design of courses also has begun. Girls are a distinct minority in TVET programs, despite recent efforts to target low income students and girls. A 2002 study (Gender and Development, 2002) showed that few girls break ranks and train in non-traditional fields. Although they meet little resistance in school, the job market is not friendly. In general, the training available to girls in the public and NGO systems is in traditional fields like sewing, weaving, and hairdressing.

The topic of workforce development also raises possibilities for new avenues of non-formal education, teaching basic skills like literacy and numeracy at the place of employment or as a part of TVET programs. For example, garment workers are receiving training in health, life skills, gender, and worker rights. Basic education skills and computer training added to this agenda might contribute to their prospects for mobility and advancement.<sup>20</sup>

## 3.2.3 Links to health and governance

The cross-sectoral impacts of girls' and women's education are well documented. Mother's education (rather than father's education) is strongly correlated with personal and family health, family size, children's nutritional status, and children's educational attainment, especially daughters. Ensuring that girls do not get left behind as the educational system grows and the economy changes, has benefits for the economy and society as a whole as well as for political development and governance.

The trade-off between school and work for poor children in Cambodia points to an obvious link between success in gender integration in education and child labor and trafficking. The school and curriculum have been cited as a mechanism for reaching adolescents and transmitting important messages for health. Conversely, access to child health services is crucial to success in school.

The education reform and goals are centered on school-based education, while the reality is that many young people are forced to leave school before they can finish the basic education cycle. A back-up system of non-formal basic education for young people in communities or places of employment, perhaps

<sup>&</sup>lt;sup>20</sup> US Department of State is funding a similar program through Pact, the Self-WORTH Women's Empowerment Program. This project combines literacy training with a micro-enterprise development project.

linked to other activities in health or skills training, can help bridge the gap. Community-based programs are particularly important for girls who are not in school because of family responsibilities. Experience elsewhere has shown that non-formal basic education for girls, like formal education, contributes to improvements in family health and education.

Education is linked to governance, not only through the curriculum but also through the interaction in the school and the potential role of the school as a community hub. The role of the "school community" (students, teachers, parents) as a place where people interact and children learn the rules of participation through experience reiterates the importance of having women as well as men in positions of authority and respect to serve as role models.

#### 3.3 GOVERNANCE

Good governance is a key concern in national policy strategy statements, and is highlighted by civil society groups and donors as central to the peace, stability, and prosperity. Improving political and economic governance addresses impediments to democratic, economic, and social development. This scope of this analysis takes a broader and longer-term view of challenges that affect good governance – focusing not just on political elections or what government does, but on private sector and civil society as well. The areas covered in this analysis are:

- Corruption
- Justice Sector including access to Justice
- Human Rights, including Trafficking
- Democratic Local Governance and Decentralization
- Sustainable Management of Natural Resources and Biodiversity Conservation
- Private Sector

#### 3.3.1 Corruption

Corruption is ubiquitous and pernicious; it is a fundamental obstacle to good governance. A recent report assessed the financial impact of corruption on government coffers at between \$300 to 500 million (Calavan et al, 2004). Large-scale corruption coexists with small and medium exactions, often paid on a daily basis. Larger sums change hands as bribes and kick-backs for illegal activities, including forest concessions and the trafficking of women and children, while smaller amounts are handed out as "facilitation" fees for services that should be free.

The impact of corruption on women (and the poor) is particularly difficult in situations where there is a lack of transparency in the allocation of resources, and in delivery of services. Funds earmarked for schools and health centers are diverted, and natural resources (forest and land) are passed to concessionaires with little attention to community needs.

Low wages is one of the explanations given for the illegal fees charged by teachers and other public servants who make an average of about \$20 a month from their official salaries. The same is true for public health, where access to services often require a supplemental payment to doctors, nurses, or other health care personnel. These charges are rationalized as "survival fees," with limited public awareness that this type of corruption is a violation of rights.

A study undertaken by the Center for Social Development indicates that women are complicit in this situation of widespread corruption, because they pay bribes. What is less understood is how power relations and gender roles affect opportunities for bribe-taking and bribe-giving in Cambodian society. Is corruption simply a matter of position – meaning those with the power do? Or is there a gender dimension? Respondents suggest that men are more inclined to be corrupt than women. However, most agree that the link between gender and corruption is difficult to ascertain. A study to assess the impact of gender roles and power relations would shed light on these issues, and could provide strategic data for interventions that address gender issues.

Both men and women are victims of corruption. Women are in some ways more frequently forced to pay bribes as facilitation fees to speed up or secure services, because they are generally responsible for managing the household, including schooling for children and health care for family members. In effect, women as well as men are caught in a web of corruption woven by a culture of impunity, not by choice but because of necessity.

The costs of corruption are not just financial. Corruption also affects human and social capital – by misdirecting human resources and undermining sociopolitical institutions. Citizens loose faith in their government, and its ability to accountably and transparently provide basic services and render impartial justice. The challenges are huge. Cambodia's judiciary is extremely weak and there is an absence of the rule of law. Some progress is being made in training judges and prosecutors, but the number of legal professionals remains inadequate and most judges appear to be influenced by political pressure. An independent judiciary and a special council to investigate allegations of corruption, in addition to the passage of the anti-corruption law which is pending, could begin to turn the tide on corruption. These steps will help to illuminate the extent of the problem, and provide potential avenues for redress.

#### 3.3.2 Justice sector, including access to justice

As discussed, Cambodia has a reasonable framework of national legislation and international conventions upholding human rights. However, the implementation and enforcement of these legal frameworks are hindered by a number of factors, especially for women and the poor. Knowledge about legal rights is low among both men and women, but women tend to be relatively disadvantaged because they are more isolated than men. Lack of awareness as well as women's relative lack of power increase their vulnerability to exploitation and abuse. There is also a widespread culture of impunity which protects perpetrators rather than victims of violence, corruption, and abuse.

Some of the worst examples of abuse are set by government officials. A recent report examined the preponderance of rape and indecent assault, and the accused by different occupations (Hicks, 2004). Government employees were identified as the second most likely to be accused of committing these crimes (28%) while farmers and fishermen were the most likely (29.5%). The third most likely group to commit rape and indecent assault were students (14%).

That farmers and fishermen rank highest is partly a result of the fact that most Cambodians are employed in those sectors. However, government employees are a much smaller fraction of the overall workforce. One explanation for their over-representation is that government regulations have, until recently, protected wrong-doers. Prior to legal reform in 2001, government employees accused of a crime could not be arrested without the consent of their department or ministry. This procedure has now changed somewhat, but is still inadequate. Departments now have to be informed three days prior to arrest, which provides ample time for the accused to escape authorities.

Another problem is the judicial system. Observers suggest that it is characterized by political interference, incompetence (due to low professional standards and a lack of training and education among judges) and systematic corruption. One report documents that standards of "fairness" in trials – with decisions made by an independent judge, based on arguments from well-trained and independent prosecutors and defense lawyers – are exceedingly low, especially for the poorest and most vulnerable members of society.<sup>21</sup> The subordinate status of Cambodian women and the traditional code of conduct for women are reflected in respondents' observations of a lack of sympathy or empathy for women in court proceedings, with numerous examples of judges "blaming the victim" in the case of rape or asking women inappropriate questions during divorce proceedings.

Some suggest that the judicial system would be more responsive to gender issues if women were better represented in the judiciary. In 2003 there were 14 women judges (12%), one woman prosecutor (1%), and 129 court clerks (19%). (Fajardo et al, 2005; UNIFEM, 2004) There have been some improvements in the judicial reform process. A woman now heads the newly established Royal School for Judges and Prosecutors. And donor-sponsored scholarships are encouraging women into legal training and increasing the number of women lawyers. The East-West Management Institute (EWMI) recently established a network for lawyers to come together and share experiences. This network could be a useful forum to promote and support women in legal studies, as well as a forum to discuss issues such as domestic violence and land ownership rights.

Legal frameworks need to be codified in practice, through effective implementation and enforcement. Access to information is essential, especially

 $<sup>^{21}</sup>$ Based on PowerPoint presentation by Sok Sam Oeun, "Legal Aid in Cambodia," presented at the National Forum.

for women who lack awareness about their rights. Support to legal aid groups, which represent the poorest and most vulnerable in legal disputes, is also critical.

# 3.3.3 Human rights, including trafficking

Human rights and access to justice are overlapping concerns in Cambodia. A recent study (Fajardo et al, 2005), defines the right to access to justice as the ability to "seek and obtain fair and effective responses for the resolution of conflicts, control of abuse of power, and protection of rights, through transparent processes, and affordable and accountable mechanisms."

Barriers to justice include cost, language, distance to courts, and the lack of lawyers. There are also problems with bias, political patronage, and the abuse of power. Given the limitations of the judicial system, women's access to justice is even more problematic than men's. Not only do women often lack resources, mobility, and knowledge of their rights, there is a fundamental difference in bargaining positions based on traditional norms, which assign a lower status to women, and opportunities, which enable men to bond more easily with officials and local authorities.

Most cases are heard not by the courts, but by village chiefs and commune councils. An Access to Justice study estimates that commune councils hear 40,000 cases per year. Approximately two-thirds of these cases are resolved quickly, generally through reconciliation. However, this emphasis on resolution through reconciliation can be problematic, especially for women and when a crime (such as rape or an injury) has been committed. Women are frequently pressured to return to or endure an abusive situation. There are even reports of rape victims being forced to marry the rapist.

Criticisms of local authorities' ability to resolve disputes are numerous. They include prejudice, bias, partisanship, lack of legal knowledge, large fees for services, and problems of accountability. Another problem is that these Alternative Dispute Resolution (ADR) mechanisms generally lack formal authority to enforce decisions or agreements that should be heard by the courts, particularly in divorce and criminal cases. However, local people seem to prefer to go to local authorities rather than to courts, which are located in the cities, because of the ease of access and financial constraints.

For women, especially, the costs of court can be prohibitive. Thus, domestic violence, separation, alimony, and even rape cases tend to be mediated locally. Women lack the financial resources to go to the courts or even to ask for financial assistance. Moreover, in court cases the victims of violence (usually women) have to pay forensic fees to obtain supporting evidence, and do not receive reparation or payment of legal costs. Women also carry the financial burden in divorce cases and the care of children. Forty percent of civil cases are for divorce, and 80% of the plaintiffs are women.

Most conflicts in Cambodia are about land or gender-based violence. Over 80% of land is unregistered, and owner-occupiers lack proper titles. Disputes

between neighbors are often easily resolved.<sup>22</sup> However, cases of separation or divorce, or those involving land concessions are difficult. Women are frequently on the losing end of decisions in divorce or separation cases, and the poor face an uphill struggle in fighting for land and resource rights where concessions have been granted. Gender-based violence accounts for 48% of the conflicts managed by village chiefs and commune councils.

Locally managed conflict resolution is popular because other options are not feasible, but they do not provide the binding decisions or guarantees of legality that are needed. This raises questions about the quality of "justice" provided through ADR mechanisms, such as the commune councils. While ADR increases access, it might not result in justice. At issue is how to improve ADR options, through training programs and better regulation of decisions and enforcement. One suggestion is to establish a justice council or tribunal at the district or commune levels. Such a body would ideally consist of independent members (men and women) with a legal capacity to mediate as well as render binding decisions which could be enforced (Fajardo et al, 2005). In this way, access is more likely to equate with justice.

Another human rights concern is the trafficking of women and children. Cambodia is a sending, receiving, and transit country for trafficking. Though there is some dispute about the overall numbers, an estimated 80,000 to 100,000 women and children are trafficked within Cambodia and to and from neighboring countries, particularly Vietnam.<sup>23</sup>

Traffickers are able to operate with impunity because of inefficient law enforcement, and problems of corruption and discrimination. A 1998 report found that very few women sought prostitution "voluntarily" (ADB 1998). Close to half (47%) were sold against their will, 34% left because of extreme poverty, and some were rape victims who had been cast out of their communities. A significant number were sold by their families or tricked by traffickers and held in debt bondage at brothels (UNIFEM, 2004).

Trafficking is a complex issue which requires responses on multiple fronts: economic, social, legal, and judicial. The usual focus is on the supply side – the numbers of young women and girls who are vulnerable because of poverty, lack of alternatives, and discrimination. However, demand forces – for services of prostitutes or exploitative labor situations – should also be considered.<sup>24</sup> In addition to programs that address prevention, protection, enforcement, recovery, rehabilitation, and reintegration, attention should be given to the exploration of agreements for safe and legal migration. Upwards of 200,000

<sup>&</sup>lt;sup>22</sup> The Cadastral Commission has received 2079 cases since its creation in 2003. Of this number, 26% have been resolved, 10% have been refused, and 64% are still pending. The most difficult cases to resolve are those involving concessions.

<sup>&</sup>lt;sup>23</sup> A recent study provides an estimate of 18,256 prostitutes in Cambodia. This is lower than previously estimated figures. Regardless of the numbers, trafficking is a serious crime. However, a more accurate evaluation of the numbers affected can lead to better counter-trafficking strategies. (See Steinfatt, 2003.)

<sup>&</sup>lt;sup>24</sup> A study carried out by the Ministry of Tourism, the National Council for Children and World Vision (2000) found that 22 percent of foreign tourists came to Cambodia for sex.

young people will be entering the workforce annually by the year 2010. Not all of these individuals can be absorbed, leaving them vulnerable to exploitation. Safe and legal migration policies could improve the status of Cambodian workers abroad, providing better labor and wage guarantees for temporary employment opportunities as well as a way to monitor remittances.

# 3.3.4 Democratic governance and decentralization

Decentralization – the transfer of authority and responsibility from central to intermediate and local governments – is a strategy for deepening democratic process, by increasing accountability, transparency, and responsiveness. The idea is that decisions taken closest to a constituency will better reflect the preferences of citizens, especially the poor and women.

Decentralization is meant to strengthen participatory development through better service delivery. However, there is often a reluctance to share the scarce resources in the central government, and to provide the authority as well as the responsibility to implement projects at the local level. Furthermore, local government can be captured by local elites, with problems of corruption and gender discrimination replicated at the local level. A recent report by UNIFEM (2003) stressed the need to ensure that decentralization does not duplicate the biases evident in national-level planning. To accomplish this, it advises that the issue of women's poverty and human rights be addressed by ensuring that poor women and men are equally empowered to contribute to and benefit from decentralization – which is what a number of organizations are doing at the commune council level.

Positioned at the local level and with increasing representation by and for women's rights, Commune councils signify an important intersection of decentralization and gender in Cambodia. As mentioned, 954 women were elected to commune councils in 2002. While this represents a significant gain in overall numbers, it is only eight percent of the total number of 11,261 commune councilors in 1,621 commune councils across the country. Respondents express hope that the number of female representatives will at least double in the upcoming 2007 commune council election, and in the 2008 national assembly elections.<sup>25</sup>

Women's political participation is frustrated, in part, by male-dominated patronage systems that rely on power and kick-backs for favorable placement on political party rosters. In other countries, quota systems have been used to achieve equity in political representation. In the run-up to the commune elections, the MoWA and NGOs lobbied for a 30% quota for women. However, this was rejected by the prime minister who claimed that this was discriminatory and therefore violated the Constitution. An informal agreement was reached with the political parties to have 30% female candidates on their lists. These names were placed at the bottom of the political party rosters, reducing

<sup>&</sup>lt;sup>25</sup> The number of women representatives in the national assembly elections of 2003 was only marginally higher than the number of female members elected in 1998 (11.5%).

chances of election. Given the current electoral procedures and the system of proportional representation, increases in women's political representation in the future will depend largely on each political party's commitment to increasing the number of female candidates and positioning them higher on the party list.

Since late 2002, the National Democratic Institute (NDI) has supported women's political participation through the formation of a national women's caucus, across political party lines and with women from civil society organizations. More recently, NDI formed a similar forum for youth. In addition, participants in the NDI political academy training program, most of whom are women, are taught techniques for building political parties, increasing membership, and fundraising. The most important part of this program is the informal exchange, and the opportunities created to increase communication across political party lines.

Other constraints to women's political participation include: lack of confidence, low education, workloads, discrimination, finances, and security. One way that some of these concerns are being addressed is through training programs designed to promote women's political participation and increase their problem solving skills. These programs have been supported by NGOs, especially Women for Prosperity (WfP) and Gender and Development for Cambodia (GAD-C), as well as through the Seila program. For example, beginning in 1995, WfP (with support from The Asia Foundation), has played an important role in training women for leadership roles and as political candidates and representatives. In the 2002 commune council elections WfP trained over 5000 women, focusing on use of the media, advocacy, legal provisions, and decision-making. Currently WfP facilitates quarterly discussion programs for women politicians focusing on problem solving. In September 2005, however, a pilot training project (funded by UNICEF), has been developed for both men and women.

NGOs have also been instrumental in establishing networks and providing capacity-building training programs for grassroots women so that they can more effectively participate in local government structures. Both professional and personal challenges faced by women as candidates and commune council members are addressed. In most programs, support is given across political party lines which lessens problems of partisanship and helps to build consensus.

It is important that, increasingly, male commune councilors are also being included in gender training programs. This exposes them to different gender-related issues, and sensitizes them about the importance of and methods for addressing the needs of women. Commune councilors (both men and women) in Battambang and Pursat provinces offer that when men are included they become more sympathetic to the situation of women, and it is easier to address problems of gender-based violence and for men and women to work together

<sup>&</sup>lt;sup>26</sup> Seila is a UNDP-supported program. It works in five provinces to help local governments plan, finance, and implement development initiatives. The goal of the Seila Gender Mainstreaming Strategy 2001-2005 is to ensure that "Government has sustained capacity to mainstream gender in poverty alleviation and governance...to promote equitable participation and empowerment of women in development." It provided support to provincial Departments of Women's Affairs to undertake gender mainstreaming initiatives.

as colleagues.<sup>27</sup> However, some caution that training women separately should be done first. A men's network in support of gender and development has been established by GAD-C. The participants are selected by application, and the Cambodian Men's Network has grown so rapidly that GAD-C had to cap the number of members at 1,000 across 12 provinces.

Women are the demographic majority in Cambodia, but they are also the poorest, least educated, and politically most under-represented segment of the population. More equitable representation of women in decision-making and leadership positions is needed. In many countries around the world, it is easier for women to gain a political foothold at the local level before participating in national elections. In the case of the commune councils, there are some indications that support for female politicians is on an upward trend.

Popular support for commune councils in general, and now support for women commune councilors in many locations is growing. Evidence suggests that female politicians are overcoming traditional barriers to actively engage in commune council decision-making and dispute resolution. It was suggested that women commune council members tend to be more tightly linked into community, because they are more involved in rituals or ceremonies and better at talking with all members of the community, especially other women and the poor. Women commune councilors are establishing a good track record of listening, knowing what's happening in the community, and being effective. According to some respondents, women politicians are viewed differently from men – as more trustworthy, less violent, and more adept at problem solving. Other respondents suggest that though there are serious and real constraints to women's political participation, they can be overcome – adding that once overcome, there is limited resistance from male colleagues.

#### 3.3.5 Sustainable Management of Natural Resources

Natural resources governance – transparent, accountable and participatory management of land, forests, and protected areas – is a great challenge in Cambodia. Opportunities to promote community rights in the management of these resources have increased with the passage of the Community Forestry law, and the moratorium on forest concessions. However, land remains a contentious issue, with ownership concerns and tenures of short duration.

Growing landlessness and near-landlessness, combined with diminishing access to common property resources, such as forests, are increasing poverty and jeopardizing the food security of rural households, especially for women (UNIFEM, 2004). Research in the Tonle Sap region (GAD-C and FAO 1999) revealed that women and girls engage in a wider range of activities in agriculture and forestry to bridge gaps in income and compensate for transitory food shortages. Loss of land and of access to natural resources undermines coping mechanisms on

<sup>&</sup>lt;sup>27</sup> Seven commune councils were visited in Battambang and Pursat provinces, during a brief field visit. All were mixed meetings of male and female commune council members.

which women depend. As a result, women are becoming more vocal in their protests.

There is significant confusion about land tenure. Land titles and cadastral maps were destroyed in the 1970s, with land redistributed with rights of use but not ownership in the 1980s. Ownership rights were re-established in 1989 and a land law passed in 1992. However, formal certificates were difficult and expensive. This had a negative impact on women's land rights, especially for female-headed households. War widows own less land than the general population (.5 hectares), and nearly half of them are landless. Landlessness for female-headed households is one in five (21%), compared to one in eight for households in general. A new Land Law was passed in 2001, with a measure to ensure that both women and men are identified as owners of land. However, joint title does not necessarily confer legal rights, as customary practices may not fully recognize women's ownership rights.

Loss of land and forestry resources also result from concessions, land grabbing, and illegal encroachment. Respondents suggest that the moratorium on forest concessions has simply been replaced by land concessions which also destroy forests.<sup>28</sup> They also note that in the Cardamon region confusion over tenure is being used to pit vulnerable groups of settlers against each other, forcing families to move deeper into the forest where there is no access to services and a greater risk of land mines. The Community Forestry Alliance for Cambodia (CFAC) is working to establish community forestry areas partly to stabilize forest areas. WildAid is experimenting with a sustainable agriculture model to stem the loss of forest area and biodiversity.

This intersection between conservation and development has gender implications. A multiplicity of actors and stakeholders are concerned with conservation and development initiatives, but generally insufficient attention is paid to differences in interests, perspectives, and power. Gender relations play out in the traditional division of labor that assigns specific tasks to women and girls, and men and boys, in agriculture, fisheries, coastal areas, upland areas, and forests. However, more gender-disaggregated information is needed, particularly about livelihood systems, rights and responsibilities, and values and attitudes toward key resources. Analysis is further needed on how gender roles are changing in response to market forces, out-migration, and the growing number of women-headed households.

Decisions about resource management are taken both publicly and privately – in meetings and in actual use. Daily decisions, in particular, reveal the opportunities and constraints, incentives and disincentives that men and women

<sup>&</sup>lt;sup>28</sup> Land concessions are a major point of conflict. By the mid-1990s, forestry and other concessions amounted to one-third of Cambodia's most productive land, with about 2.7 million hectares under the control of large corporations. Rural communities were evicted, and not permitted to collect resin or products from the forests. In 2001 the new Land Law stipulated that the size of concessions should be limited to 10,000 hectares. However, in practice, large concessions are still being awarded.

face, both individually and collectively. Priorities and interests frequently differ, and to build real consensus different perspectives must be discussed to determine realistic management plans. For this reason who represents the community, and how they are accountable to different groups, become key questions in the governance of natural resources. Article 18 of the Sub-decree on Community Forestry Management "encourages" that the participation of women in the community forestry management committee. This is not explicit enough. Community-based committees or networks should have a minimum of 30% women's participation, and leadership roles also reserved for women.

#### 3.3.6 Private Sector

Economic growth through increased investment and private sector development is a prerequisite for combating poverty. A recent assessment by the Economic Institute of Cambodia (EIC) (2005) points to corruption and lack of transparency as the leading factors inhibiting Cambodia's competitiveness in the global economy and ability to attract investment. Another factor is the general inadequacy of public institutions to provide basic physical, legal, and social infrastructure to make investment feasible.

While growth is a necessary condition, growth alone will not eliminate the underlying inequalities in Cambodian society that reinforce, and are perpetuated by, poverty. Differences and inequalities between men and women in employment and position in the workforce can easily be accentuated by private sector development schemes that do not take account of gender in the planning. Macroeconomic and trade policies that identify and offer incentives to potential growth industries affect men and women differently, depending on the types of jobs created, skills required, and location, among others.

The EIC Cambodia Competitiveness Report 2005-2006 (2005) also cites the knowledge and skills of the human resource base in Cambodia as an important constraint to investment. Improvement of the education system and specific workforce training are needed to overcome this constraint, and gender analysis is essential to maximize the capacity of the working population and to ensure that both women and men can benefit from the growth. The question of who benefits from growth is an important one in determining the impact on poverty and long-term development potential.

The link between gender relations and macroeconomic policies is difficult analytically, but the far-reaching impact of the rapid growth of the garment industry illustrates why this analysis is necessary. Potential impacts include: the effect of the influx of young, female migrants to the city on gender relations and household economics in both the city and the rural communities they left behind; the flow of remittances to rural areas; the effect on school enrolments of changes in the expectations for girls' employability; and, the contribution of available jobs to school dropout rates for girls.

Cambodia is now confronted with a significant unmet demand for employment as a result of large numbers of young adults entering the labor market. Imbalance in opportunities available to men and women is likely to have unforeseen macroeconomic and social consequences. For example, the new low skills jobs for young women in textiles have not been matched to date by formal sector opportunities for young men. At the same time, women have relatively limited access to supervisory and managerial positions in emerging sectors. Further, the future of these jobs is uncertain. The massive unemployment that would result from transfer of these factories to labor markets lower wages and less regulation in China would have a marked impact on economic prospects and social relations for the country as a whole.

#### **Informal Sector**

EIC (2005) estimates "that 85 percent of the Cambodian workforce activities are in the informal sector, which contributes to 62 percent of the country's GDP." Little attention has been given to strengthening micro- and small-businesses, and to building on their role in employment and income generation, particularly in rural areas. Women are important players in the informal sector in agriculture and food processing, dressmaking, handicrafts, retail sales and street vending. Small businesses should be a part of the backward and forward linkages that add to the impact and feasibility of major formal sector investment. To the extent that small businesses can benefit from growth policies, the impact on poverty (and presumably women) improves. Again, the executives interviewed for the *Competitiveness Report* (EIC, 2005) cited the lack of quality local suppliers as an impediment to investment.

# **Governance and Competitiveness**

The growth of the garment industry in Cambodia was based on favorable trade agreements with the United States and the European Union, which were contingent upon the ILO working with the factories to ensure sound labor practices. For this reason, the garment factories are much more bound to honor the minimum wage requirement and the stipulations of the labor law than private employers in other sectors. The Cambodia textile sector has not registered major losses this year despite the termination of these agreements, in large part because Cambodia is recognized as free from abusive labor.

At the same time, the Cambodian government has little role in enforcement of the labor law and the compliance in the garment factories is not replicated in other sectors. In addition, within the garment factories constraints remain on the ability of women workers to participate in enforcement of their rights and to contribute to operations and governance. Although Cambodian women are 90 percent of the workforce in the factories, they rarely are employed as supervisors or managers <sup>29</sup> and they are almost never in leadership positions in the unions. Most union leaders are men and most are from outside the factory. In interviews, both ILO and ACILS identified these two factors as key gender-based constraints for the factory workers.

<sup>&</sup>lt;sup>29</sup>There are some non-Cambodian (e.g., Chinese) women who are supervisors in the factories.

#### 3.4 Gender Issues and Disabilities

International NGOs became involved with the plight of people with disabilities in Cambodia as early as the 1980s. As attention to the issues grew, the Disability Action Council (DAC), a semi-autonomous national body to coordinate the activities of NGOs, the government, other international organizations, and donors was created. The DAC began operations in 1998, with financial support from USAID. A Women with Disabilities Committee was formed immediately and a strategic action plan was developed. Unfortunately, the committee no longer is functioning, primarily because of the extended illness of the woman who led the effort. The DAC is now in a process of re-structuring itself, with plans to revive the Women with Disabilities Committee.

Although the national "Strategy Directives for Disability and Rehabilitation" includes a component on women and disabilities, gender differences in disability issues have been relatively neglected. Gender disparities are present in the prevalence of disabling conditions. Girls and women are less likely than boys and men to be disabled by accidents, while other disabilities like blindness and multiple sclerosis are more prevalent in women. In Cambodia, attention has focused on disabilities resulting from the decades of violence and more recently the land mines, but statistically these factors are responsible for a minority of the disabling conditions. Depending on the survey, between three and nine percent of the population is disabled, and an estimated 20% of these are children.<sup>30</sup>

In a developing country like Cambodia, disabled persons face multiple obstacles in terms of mobility, availability of services especially in rural areas, and discrimination. Among disabled persons, girls and women face "double discrimination" (World Bank 2006) as women and as disabled people. Accordingly in Cambodia, disabled women are described as "the poorest of the poorest of the poor." Tompared to disabled men, disabled women are less likely to attend school or receive vocational training, to receive health care or rehabilitation services, or to be employed. They also are more likely to be living alone. Since they have few options for employment and often are considered ineligible for marriage, they are viewed as a burden and very prone to abuse. Girls and women with disabilities tend to have very low self-esteem and to lack advocates and opportunities to work together.

<sup>30</sup> Personal communication, DAC

<sup>&</sup>lt;sup>31</sup> Personal communication, DAC.

# Statement of Work (SOW) for Gender Assessment USAID/Cambodia

#### Introduction

USAID/Cambodia is working through the stages of developing a Performance Management Plan (PMP) and Results Frameworks for implementation of the newly approved Strategy Statement. In support of this new strategy, the Mission will conduct a gender analysis for the sectors that are covered by the strategy. A gender assessment of ongoing activities will be accomplished at the same time.

Gender Analysis is among the technical analyses and assessments that the Mission is required to conduct. The gender analysis will contribute to the design of appropriate and sustainable activities. Agency technical guidance (ADS 201.3.12.6) states that:

"... Findings from gender analysis, such as any actions identified for overcoming potential obstacles to SO achievement, may help to determine how gender needs to be addressed in the activity...

For each activity subject to approval, the Operating Unit must, in one page or less, outline the most significant gender issues that need to be considered during activity implementation...:

- (a) Are women and men involved or affected differently by the context or work to be undertaken?
- (b) If so, would this difference be an important factor in managing for sustainable program impact?"

In the new USAID/Cambodia Strategy Statement, gender is identified as a crosscutting theme:

"... mainstreaming gender throughout our Strategic Objectives is the best approach... USAID/Cambodia will conduct a gender analysis to help fine-tune indicators and shape activities that effectively respond to gender concerns."

The analysis is intended to support establishment of appropriate gender equality goals for the Mission in all sectors. Through the gender analysis and a gender-focused evaluation of ongoing activities, this gender assessment will document strengths and "Promising Practices" that have been identified during the Interim Strategic Plan (2002-2005) activities. The combination of a sector-focused gender analysis with a gender assessment of selected activities will provide initial guidance for the Mission's gender action plan. In this way, the

assessment will provide preliminary guidance or language on mainstreaming gender into USAID/Cambodia's program.

It is expected that future gender studies will be able to build on this assessment. Three Strategic Objectives (SO) in USAID/Cambodia's new strategy take in twelve Program Components. USAID/Cambodia's portfolio also includes humanitarian assistance. USAID supported programs to Veterans International (VI) and Handicap International (HI) will also be included in this assessment.

This Scope of Work describes five interrelated tasks:

- 1) review key gender issues and gender-based constraints for men and women in Cambodia;
- 2) assess gender integration in ongoing activities and look for opportunities to further mainstream gender;
- 3) analyze strengths and Promising Practices related to gender issues in ongoing activities of expanded Strategic Objectives (SOs 9 & 10);
- 4) identify key opportunities for addressing critical gender issues that are common to all SOs (cross-cutting), with a focused look at the new Strategic Objective (SO 12);
- 5) assess the institutional context for support of gender mainstreaming in Cambodia

# **Purpose**

The purpose of the gender analysis is to collect and analyze gender information on USAID/Cambodia's focus areas for future program development and activity design. The purpose of the gender assessment is to document USAID/Cambodia's successful efforts to address gender issues and to identify opportunities to strengthen those efforts. The assessment will ensure continuity in learning and it will also support a holistic approach to mainstreaming gender in USAID/Cambodia's new strategy.

The assessment will highlight successful approaches & activities, identify new entry points for addressing gender issues and suggest how the Mission might take full advantage of connections between the SOs by using gender as a crosscutting theme.

Using a gender focus to identify and analyze common issues across SOs will support USAID/Cambodia's cross-cutting themes (transparency and access to information, linkages and gender). Some common issues to focus on include economic development, decentralization and governance. Another cross-cutting issue is gender based violence (GBV). As victims of GBV, girls in schools and homes as well as those working in factories or the sex industry are at

increasing risk to human rights violations. There are indications that GBV contributes to heightened risk of HIV infection.

All Program Components (PCs) in the Strategic Objectives, as well as activities in humanitarian assistance, will be addressed; however, emphasis will be placed on the expansion of SO 9 and SO 10 and the new SO 12.

The SOs and PCs to be addressed are:

- SO 9 Improved Health Services in HIV/AIDS and infectious diseases as well as in maternal, child and reproductive health
  - PC 1: Reduce Transmission and Impact of HIV/AIDS;
  - PC 2: Prevent and Control Infectious Diseases of Major Importance;
  - PC 3: Improve Maternal and Child Health and Nutrition
  - PC 4: Build Health Systems Capacity
- SO 11 Increased Relevance, Quality and Access in Education
  - PC 1: Improve the Quality of Basic Education;
  - PC 2: Improve Quality of Work Force
- SO 12 Improved Political and Economic Governance
  - **PC 1**: Promote and support anti-corruption reform;
  - PC 2: Improve Justice Sector/Legal Framework;
  - PC 3: Protect human rights and equal access to justice;
  - **PC 4**: Support democratic local governance and decentralization;
  - PC 5: Improve Sustainable Management of Natural Resources;
  - PC 6: Improve private sector growth

For all PCs in the ongoing SOs, the Assessment Team has two goals: to collect and analyze information for the gender analysis and to investigate ongoing activities for promising practices that have a distinctive gender aspect. The assessment can highlight strengths in ongoing activities and then focus on analyzing how the planned expansion of activities might affect or be affected by gender relations. Based on that analysis, the assessment will recommend critical entry points with illustrative indicators. Current partners will have an added resource in their efforts to address gender issues. For the new SO, the Assessment Team will primarily collect and analyze information for a gender analysis, and address the two questions articulated in ADS 201 (as noted in the Introduction). Further ideas on how to introduce gender-sensitive management in activity design will also promote gender equality in new activities.

## Background

Gender disparity in Cambodia is influenced both by traditional culture and by being a post-conflict society. In this changing society, the vulnerability of females is consistently demonstrated across sectors and throughout the country. In both urban and rural areas, violence and lack of access to resources keeps girls and women marginalized. Even in relation to HIV/AIDS, there are indications that women and children are the populations where infection rates are increasing the most.

As indicated in "A Fair Share for Women: Cambodia Gender Assessment," girls and women are at a marked disadvantage in access to formal education, information, health care, and safety. Gender-based violence is one facet of a complex picture that illustrates how girls'/women's low status in current society is linked with increases in human rights violations. While violence in society affects everyone, the increased incidence of domestic violence and gang rape along with the industry of human trafficking puts girls and women at greater risk. Women are also marginalized in terms of access to education, health care services, land and other natural resources. There are few women in leadership positions in any technical sector of government service, so lobbying for women's /girls' rights falls mainly in the domain of NGOs and donors. The notable exception is the Ministry of Women's Affairs (formerly the Ministry of Women's and Veterans' Affairs). There is still strong and clear leadership from the current Minister of Women's Affairs, HE Dr. Ing Kantha Phavi. Various NGOs and donors play different roles in supporting the Ministry while it struggles to play a significant role in both promoting anti-violence legislation and in promoting gender mainstreaming in all ministries.

Cambodia Socio-Economic Survey by the Ministry of Planning has recently been completed, and full data should be available sometime in September. Early release of information indicates that, in this changing environment, women fair poorly compared to men across sectors (education, health and economics). There is little gender disparity in primary school enrollment, but female numbers drop quickly as they reach early teens. Literacy rates for females in every group above 15 years of age are lower than males.

Employment in agriculture, hunting and forestry has declined from 74.6% to 55.4%. While employment of the economically active population has increased since 1999 for both sexes by 8.5 percentage points, levels and status of employment are not equal. The garment industry has played a significant role in keeping female employment high, but employment stays in the lower status levels.

## **Scope of Activities**

The primary tasks of the contractor/consultant are to:

- A. Carry out a gender analysis on targeted topic areas as well as an assessment of the Mission's current efforts to integrate gender in its ongoing SOs. This effort will:
  - Review the Mission's new strategy and preliminary PMPs, and key
    documents from the program portfolio for integration of gender, to
    identify key gender-based constraints, and assess potential gender
    issues for the new strategy.
  - Produce definition/clarification of terms used in gender assessment and analysis.
  - Analyze strengths and opportunities (e.g., Promising Practices) for integrating gender for extended SOs.
  - Produce recommendations for possible entry-points for incorporation of gender in carryover SOs as well as the new SO (by newly identified PCs of the new strategy).
  - Identify weaknesses and threats related to gender-based constraints and proposed entry points.
  - Provide statements of the key gender based-constraints relevant to each SO as well as for the humanitarian assistance program.
     Statements should incorporate critical Cambodia issues such as trafficking, gender-based violence, adoption, disabilities, and economic development.
  - Identify sources / documentation of sex-disaggregated data and for assessing gender-relevance of indicators. The assessment team might offer suggestions for how to analyze the potential impacts of USAID/Cambodia's proposed strategic approaches on the relative status of men and women in the country/region.
  - Identify local expertise on gender (e.g., NGOs, academics, research institutions, government ministries) that can be called on to provide in-depth technical assistance.
  - The assessment is to be organized and shaped by:
    - USAID's Strategy Statement.
    - Agency and Mission's approach to mainstreaming gender; and,
    - New Program Components and any final revisions to Common Indicators, ADS, and other policy documents released before the end of this assessment and analysis.
    - Draft SO Results Frameworks (including the preliminary PMPs) and humanitarian assistance work plans

Annex A

B. Based on this assessment, draft recommendations for a gender action plan.

The draft action plan is not a deliverable from the Consultants, but a document that is developed by the Mission based upon the Consultants' gender assessment and recommendations. As finally formulated by the Mission, the detailed USAID/Cambodia gender action plan shall address fully the requirements of Agency Directives.

C. Review developing drafts of PMPs.

These are new PMPs and will not be complete. So this task does not call for a full analysis and support of the PMPs. The gender analysis will provide the backdrop for the consultant to contribute comments and recommendations on the draft PMPs. This will be in harmony with the Mission's approach to mainstreaming gender.

## Illustrative Methodology

While the purpose of the assessment is to strengthen USAID/Cambodia's program, it can also be a resource for partners and stakeholders who are working in these areas in Cambodia. The assessment will not only point to opportunities for mainstreaming gender in relevant programs/projects/activities. It will also put a spotlight on strengths in the ongoing activities through both lessons learned and promising practices.

For example, a SWOT Analysis with a gender focus will help the consultant take a positive approach in areas where USAID/Cambodia has been building experience during the last 5 years. Whatever tools are selected, the methodology should emphasize positive opportunity without ignoring potential threats that would result from weak interventions. Assumptions should be clearly stated in the recommendations.

Essentially, the assessment will:

- Spotlight where and how gender has been successfully integrated (from the Interim Strategic Plan period) and analyze "Promising Practices"
- Identify and recommend new opportunities for addressing gender issues where the program is expanding.
- Demonstrate how gender is a cross-cutting theme that can strengthen common activities across SOs (e.g., economic development; decentralization, governance)

- 1. Comprehensive review and assessment of pertinent literature and documents, including, but not limited to such materials as:
  - USAID/Cambodia Strategy Statement, Annual Reports, and/or sectoral assessments and reports, and the preliminary results framework for the proposed Strategic Plan;
  - Preliminary technical analyses for the USAID/Cambodia Strategy Statement
  - Recent literature that addresses gender issues in Cambodia including "A
     Fair Share," a cross sector gender assessment done for Cambodia Ministry
     of Veterans and Women's Affairs (now Ministry of Women's Affairs).
     Attention will be on specific sectors and areas of strategic interest to
     USAID/Cambodia (e.g., HIV/AIDS and other infectious diseases of
     importance, MCH, child health and nutrition, water resources, democracy
     and governance, anti-corruption, conflict, and human rights).
  - Studies and assessments conducted by donors, NGOs, national governments, regional organizations, and the academic community (see bibliography).
- 2. Meetings and discussions with USAID/Cambodia SO Teams and other USAID/Cambodia staff involved in developing the Strategic Statement. Where possible these shall include:
  - entry briefings with the Monitoring, Evaluation and Gender Specialist,
     Program Office, and the Front Office;
  - a preliminary briefing session for USAID/Cambodia SO Teams on any revised ADS requirements for gender in procurement and Activity Approval process, and possibilities for integrating gender into M&E.
  - meetings with SO Teams/CTOs on specific sectors and areas of interest to identify strengths; to identify how gender can be a link across sectors for similar interventions (e.g., economic-based activities, life skills training, community participation); to identify possible entry points for the incorporation of gender considerations into ongoing (as appropriate) and future activities, and to verify whether gender considerations are adequately treated in the USAID/Cambodia strategy and results framework:
  - a presentation of the gender assessment and recommendations to SO
     Teams to obtain feedback from USAID/Cambodia staff; and
  - exit briefings with SO Teams, the Program Office, and the Front Office.
- 3. Interview selected key stakeholders and implementing partners involved in current and proposed programs, including local gender expert resource groups about problems, successes, and potentialities for improving attention to gender in the new strategy.

#### **Estimated Level of Effort**

The contractor shall provide a Team Leader, and possibly another U.S. Gender Expert, as well as a local Gender Expert. The Team Leader will lead a three or four-person team in conducting a gender analysis and a gender assessment. The team will consist of the Team Leader, another U.S. Gender expert (if needed), the local Gender Expert, and the Mission's Monitoring, Evaluation & Gender Specialist. During two weeks in Cambodia, the consultant(s) will draw on his/her previous experience and knowledge of cross-sector gender assessment as well as from his/her understanding of USAID regulations and policies (such as the ADS) to produce draft documents (table of contents, list of findings with recommendations). The consultant(s) will also provide a debriefing presentation to the Mission. The Team Leader is responsible for the final production of the documents and the presentation with recommendations.

The Program Office (coordinated by the M, E & G Specialist) will compile materials for the assessment and set up appointments with partners and other stakeholders. The M, E & G Specialist and the local consultant will participate as team members for two weeks. The local consultant will draw on his/her technical and Cambodia specific knowledge to contribute to the analysis and assessment.

#### **Performance Period**

The overall performance period is starting on or about October 3, 2005 through December 1, 2005. The assessment will be conducted in Cambodia for approximately two weeks from October 10-25. Based on a six day work week, the basic schedule for the assessment is:

Week 1: Interviews with staff (SO Teams/CTOs), partners & stakeholders; site visits.

Week 2: Site visits; follow up with SO Teams / partners; produce preliminary outline with findings and recommendations; present debrief of assessment and recommendations to staff.

The consultant will submit the drafts within ten working days and a final version within 3 working days after receipt of Mission comments.

# **Assessment Team Qualifications**

The Assessment Team will be made up of three to four members with complementary skills in gender assessment and the technical areas (designated by the program components). The Assessment Team Leader and (if necessary) additional U.S. Gender Expert from DevTech will have strengths in democracy and governance and either education or health. The Team Leader is expected to have previous experience in conducting a cross-sector gender analysis.

Annex A

The other team members will include one local gender consultant with strengths in extension/outreach and democracy and governance, and the IWID Fellow currently working with the Mission (Monitoring, Evaluation and Gender Specialist). The IWID Fellow has technical strengths in civil society, integrated rural development and community-based sustainable management of natural resources (including micro-enterprises in this sector).

#### **Deliverables**

There are two main written deliverables expected: a gender analysis, and the gender assessment identifying strengths and lessons learned (including best practices) with recommendations for a gender action plan that will strengthen appropriate gender mainstreaming in USAID/Cambodia's program. Review and recommendations for the draft PMPs will be incorporated into the assessment.

Drawing on data from interviews and secondary sources, these documents will assess the appropriate technical areas for gender emphasis and make recommendations for future actions for gender and other integration, as described above.

- A preliminary table of contents, list of findings and recommendations shall be submitted to the Mission upon completion of fieldwork (one electronic copy and three hardcopies). (End of Week 2)
- A draft Gender Analysis and a Gender Assessment with recommendations for an action plan. Will be submitted to the Mission no later than November 14, 2005.
- The Final Gender Assessment & recommendations for action plan will be submitted to the Mission within three working days after receiving comments on the draft report.

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Disability Action Council (DAC)

Sinead Quinn, VSO

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East-West Management Institute (EWMI)

Terry Parnell, Grants/NGO Development Advisor

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Family Health International (FHI)

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Choub Sokchamreun, Sr. Program Officer, Focused Prevention

Dr. Pum Sophiny, Program Officer

Ministry of Women's Affairs

Dr. ING Kantha Phavi, Minister

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Women for Prosperity (WfP)
Nanda Pok, Executive Director
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Kurt Bredenberg, Chief of Party

#### **Battambang Province**

Buddhist Development Association and Supporting Environment (BDASE)

Phum Phavat, Director

**Buddhists for Development** 

Khun Nun, Self-help Group

Heang Srey, Self-Hhelp Group Svay Chhrum Village

Moeun Hoeut, Self-help Group, Anlongville Village

Khean Ratha, Self-help Group, Audambang Commune

Mean Sokun, Self-help Group, Anlongville Village

Chhan Dany, Self-help Group, Audambang I Commune

Pok Sochheat, Branch Manager

Hing Bunnat, Health staff

Yin Sar, assistant

Boy Siem, monk

Vorn Sokhom, Office Chief

Chhoeun Khhort

Roth Sopharem, nun

Commune Council, Battambang town

Commune Council, Chroy Sdao commune

Commune Council, Phnom Sampov commune

Commune Council, Rattanak Mundol commune

Department of Women's Affairs

**Deputy Director** 

Meatho Phum L'omah (Homeland)

Mao Lang, Director

Reproductive Health Association of Cambodia

Kean Sibopha, Counselor and clinic representative

Mean Phao, Outreach, women's support, clinic representative

Ham Vuthy, Youth representative

Ma Sareth, Youth Team Leader

So Tharoth, Clinic Assistant

Rural Development Association (RDA)

Chan Sinath, Executie Director

Sous Sarin, health project

Sroy Savy, agriculture project

Ouk Sokun Thea, trafficking project

Thal Vansey, credit/revolving fund project

Women for Prosperity (WfP)

Chan Lakana

# **Pursat Province**

Cambodia Health and Human Rights Alliance (CHHRA)

Sin Kim Horn, Executive Director

Suy Lang, Accountant/Administrator

Soueng Theara, Cashier

Heng Kim Ny, Assistant Coordinator

Mith Samoun, Trainer

Chantha Theary, Trainer

# Sok Ny, Coordinator

#### CARE

Bun Thoeun, Program Coordinator
Sam Hing, HIV/AIDS Project Coordinator
Muy Kek, community field officer
Kong Savoun, community field officer
Ms. Samalen, community field officer
Mok Thavy, National Immunization Program
Krous Sary, project officer
Mao Sinet, HIV/AIDS prevention officer
Chem Kosal, HIV/AIDS prevention officer

Mom Say, general health management officer

Kho Chek, Child in Distress field officer

Kim Srei Mom, Metakoruna Thmei HIV/AIDS Prevention Team Leader

Loeuk Bun Ly, Home Care Team Leader

Uch Sophal, Metakaruna Thmei HIV/AIDS project and Home Care project officer

Ry Leng, Child in Distress Team Leader Seak Phally, Ponlork Thmei field officer

Commune Council, Anlong Trot commune
Commune Council, Bantey commune
Commune Council, Ptas Prey commune
Reproductive and Child Health Association (Racha)
Koy Dy, Program Manager
Nut Vannak, Program Assistant and Trainer

#### REFERENCES CONSULTED

Addleton, Jonathan and Suzana Sorinchan. 2005. *Traditional Dancer, Non-Traditional Driver - An Interview with 'Mrs. Bean'* Frontlines, Foreign Service Nationals, P. 5.

American Institutes for Research. October 14, 2005. ESCUP Project Year One Work Plan.

Ayres, David and Kurt MacLeod. 2004. *Partnership Handbook, Promoting Decentralization through Partnerships*. PACT Cambodia.

Bickford, Annie. 2003. Advocacy Handbook – A Pratical Guide to Increasing Democracy in Cambodia. PACT Cambodia.

Birdsall, Nancy, Geeta Rao Gupta and Amina J. Ibrahim. 2004. *Task Force 3 Interim Report on Gender Equality*. Millennium Project, UNDP.

Bradley, Amanda. 2005. *Natural Resources Management Networking in Cambodia: Status, Lessons Learned, and Future Possibilities.* Community Forestry International.

Bradley, Amanda and Toeur Veasna. 2005. *Community Forestry at the Commune Level: A Report on Data Collection*. Community Forestry International.

Bradley, Amanda (n.d.). *Community Forestry in Cambodia, Questions and Answers.* USAID for Community Forestry Alliance for Cambodia (CFAC).

Brereton, Helen. 2005. *Evaluation of the Seila Gender Mainstreaming Strategy* 2001 – 2005. Power Point briefing.

Bredenberg, Kurt, Lon Somanee, and Ma Sopheap. January 2003. *Gender and Education in Cambodia: Historical Review of Trends and the Way Forward.*Prepared for Oxfam/GB by Kampuchean Action for Primary Education (KAPE). Phnom Penh.

Brown, Ellie. n.d. "Key Findings from the Research Conducted on Gender and HIV/AIDS Conducted by MoWVA, with Technical Assistance from the Policy Project. mimeo

Busza, Joanna, Sarah Castle and Aisse Diarra. 2004. *Trafficking and Health*. BMJ 2004: 328; 1369-1371. Accessed 5 October 2005 from bmj.com.

Calavan, Michael, Sergio Diaz Briquets and Jerald O'Brian. 2004. *Cambodian Corruption Assessment*. Casals & Associates for USAID.

Cambodian League for the Promotion and Defense of Human Rights (LICADHO). 2004. Cambodian Women Report 2004: A brief on the Situation of Woman in Cambodia.

CARE. 2004. Organizational Gap Analysis Guidelines – A Resource Guide for Advancing Gender Equity & Deversity within CARE.

Chamcarmon, Khan. 2005. *Gender and Development for Cambodia.* Gender Scoreboard, Annual Issue.

Charney, Craig and Steve Hopkins. 2003. *Democracy in Cambodia – 2003 – A Survey of the Cambodian Electorate*. Charney Research and the Asia Foundation.

D'Cunha, Jean. Claim and Celebrate Women Migrants' Human Rights through CEDAW. The Case of Women Migrant Workers. A UNIFEM Briefing Paper.

Disabilities Action Council. *Strategic Planning Direction for the Disability and Development* (n.d.). Component 5 – Women with Disabilities, p. 32 – 40. Mimeo.

Duvvury, Nata and Johanna Knoess. 2005. *Gender-Based Violence and HIV/AIDS in Cambodia – Links, Opportunities and Potential Responses.* Deutsche Gesellschaft fur Technische Zusammenarbeit (GZT) GmbH, Postfach 5180, 65726 Ezchborn, Germany.

Economic Institute of Cambodia. September 2005. *Cambodia Competitiveness Report 2005-2006*. Phnom Penh.

Fajardo, Raquel Yrigoyen, et al. 2005. Access to Justice, with focus on the Poor, Woman and Indigenous Peoples, Local Conflict Resolution, ADR and Judicial System- Main Findings & Recommendations. PowerPoint presentation. PMU of CLJR – MJ – UNDP, Phnom Penh.

Fitzgerald, Ingrid. 2004. Exempt from growth? The impact of trade liberalization on women in the Cambodia garment Industry. Prepared for the Gender and MDGs Project, implemented in partnership with SILAKA. UNDP/UNIFEM

Fordham, Graham. 2003. Adolescent and Youth Reproductive Health in Cambodia: Status, Issues, Policies and Programs. Phnom Penh: POLICY Project.

Gender and Development for Cambodia. 2002. *Gender in TVET. A study of the situation of young women studying non-traditional skills in Cambodia*. Phnom Penh

Greig, Alan, Michael Kimmel and James Lang. 2000. *Men, Masculinities & Development: Broadening our work towards gender equality.* Gender in Development Monograph Series #10. UNDP.

Geeves, Richard and Kurt Bredenberg. December 2004. *Contract Teachers in Cambodia*. Phnom Pehn.

Guedes, Alessandra. 2004. Addressing Gender-Based Violence from the Reproductive Health/HIV Sector: A Literature Review and Analysis. Washington, DC: POPTECH.

Hagadorn, Susan. 2004. Khmer Rouge Survivors Retell Culture for the Children of Cambodia: A Critical Hermeneutic Orientation to Narrative Imagination and Ethical Action. University of San Francisco: San Francisco.

Heder, Steve. 2005. Hun Sen's Consolidation, Death or Beginning of Reform? Southeast Asian Affairs, p. 113 – 130.

Hicks, Natalie. 2004. *The Situation of Woman in Cambodia*. Cambodian League for the Promotion and Defense of Human Rights.

KHANA. 2003. Out of the Shadows: Male to Male Sexual Behavior in Cambodia. Phnom Penh: KHANA.

Khus, Thida. 2005. *Affirmative Action Measures: A redress for Cambodian Women's Participation in Politics.* 2ed Consultative Forum on Woman's Political Participation and its Effectiveness in Commune level in Cambodia.

LICADHO. 2006. Violence Against Women in Cambodia. Phnom Penh: LICADHO Report.

Lycette, Margaret 1999. History and Current Challenges in USAID's Approach to Addressing Gender Issues in Development.

Makin, Jen. 2004. CARE International in Cambodia – Gender Equity and Diversity Organizational Gap Analysis. CARE Workshop.

Mansfield, Cristina and Kurt MacLeod. 2004. *Commune Councils and Civil Society.* 

McGrew, Laura, Kate Frieson, and Sambath Chan. 2004. *Good Governance from the Ground Up: Women's Roles in Post-Conflict Cambodia.* Women Waging Peace: The Policy Commission, Hunt Alternatives Fund.

Mehrvar, Mahrak. 2004. Gender and Decentralization: A Critical Analysis of Woman's Political Engagement and its Effectiveness in Decentralized Local Government in Cambodia. MA Dissertation, Gender and Development. Sponsored by: GTZ Administration Reform and Decentralization Project in Cambodia.

Mony, Keo. 2004. *Marriage (Cambodian), Arranged Marriage*. http://ethnomed.org/cultures/cambodian/camb marriage.html

NCHADS. 2004. HIV Surveillance (HSS) 2003: Results, Trends, and Estimates. Phnom Penh: MOH.

NCHADS/FHI 2001. 2001 Cambodia STI Prevalence Survey. Phnom Penh: MOH.

National Institute of Statistics (NIS). Cambodia. 2004. *Cambodia Inter-Censual Population Survey 2004 (CIPS)*. <u>www.nis.gov.kh/SURVEYS/cips2004/</u>

The National Institute of Statistics. 2005. *Cambodia Socio-Economic Survey Subject Matter Reports.* Phnom Penh.

The National Institute of Statistics. 2005. Migration, Summary subject matter report for the Cambodia Socio-Economic Survey (CSES) 2004, Trends in migration from 1989 to 2004 established from the set of intermittent CSES survey in the period 1993 – 2004. The National Institute of Statistics, Cambodia, in cooperation with Statistics Sweden.

NIS and ORC Macro. 2001. *Cambodia Demographic and Health Survey 2000.* Phnom Penh: National Institute of Statistics and Calverton, Maryland: ORC Macro.

Oberndorf, Robert B. 2003. *MEMO: Legal Analysis of the Community Forestry Sub-Decree*. GTZ's Cambodian – German Forestry Project.

Pact. 2005. Past Performance / Future Plans 2005 - 2008. Pact Cambodia.

Pact: Phnom Penh cited in The Asia Foundation. 2005. *Commune Councils in Cambodia: A National Survey on Their Functions and Performance, with a Special Focus on Conflict Resolution.* 

Pact. 2005. Fighting Corruption in Cambodia – The Demand for an International Standard Anti Corruption Law in Cambodia. PACT and PADCO Publication #3-2005 for USAID.

Phavi, Dr. Ing Kantha. 2005. *Irregular Migration and Trafficking in Cambodia – the Road Ahead*. UNESCAP Regional Seminar on the Social Implication of International Migration, Bangkok.

Rao, Tara. 2003. *Gender Equity & Diversity within CARE: Trends & Opportunities.* Based on the proceedings and findings from CARE's Gender Equity & Diversity Workshop Kathmandu, Nepal.

Ramage, Ian. 2002. Strong Fighting: Sexual Behavior and HIV/AIDS in the Cambodian Uniformed Services. Phnom Penh: FHI.

The Royal Government of Cambodia. 2003. Goals *Cambodia Millennium Development Report*. Phnom Penh.

The Royal Government of Cambodia. 2005. Ministry of Education, Youth and Sport. *Education strategic Plan 2006-2010*. Phnom Penh. (November)

The Royal Government of Cambodia. 2005. Ministry of Education, Youth and Sport. Education Sector Support Program 2006-2010. Phnom Penh. The Royal Government of Cambodia. Ministry of Women's Affairs. *Ministry Five Year Plan*. Phnom Pehn. <a href="www.mwva.gov.kh/mvva\_5\_year.html">www.mwva.gov.kh/mvva\_5\_year.html</a>/

The Royal Government of Cambodia. 2003. *Sub-Decree on Community Forestry Management*. English Translation of CFSD after the Council of Ministers.

Salinger, Lynn, et al. 2005. *Measuring Competitiveness and Labor Productivity in Cambodia's Garment Industry.* Nathan Associates for USAID.

Schmink, Marianne.1999. *Conceptual Framework for Gender and Community-Based Conservation* – Case Study NO. 1. University of Florida.

Steinfatt, Thomas M. 2003. *Measuring the Number of Trafficked Women and Children in Cambodia: A Direct Observation Field Study – Part III of a Series.* USAID.

The Asia Foundation (TAF) and Center for Advanced Study. 2005. Commune Councils in Cambodia – A national Survey on their Functions and Performance with a Special Focus on Conflict Resolution. PowerPoint briefing.

The Asia Foundation. 2004. Local Level Conflicts, Conflict Mediation and the Role of Commune Councils – Public opinion poll conducted by the Center for Advanced Study on behalf on The Asia Foundation. PowerPoint briefing to the National Forum on Access to Justice.

The Asia Foundation. 2005. *Commune Councils in Cambodia: A National Survey on their Functions and Performance, with a Special Focus on Conflict Resolution.*The Asia Foundation in Collaboration with the Center for Advanced Study.

Uehara, Y. 2004. *Technical Assistance to the Kingdom of Cambodia for the Implementation of the Action Plan for Gender Mainstreaming in the Agriculture Sector.* TAR: CAM 38490. Asian Development Bank.

UNAIDS. 2000. *The HIV/AIDS/STD Situation and the National Response in the Kingdom of Cambodia.* 3<sup>rd</sup> edition. Phnom Penh: UNAIDS.

UNAIDS. March 2004. *Women in Mekong Region Faced with Higher Rates of HIV Infection than Men.* Mekong Leaders' Consultative Meeting on Women and AIDS. Press Release. Bangkok.

UNDP (n.d.). Gender Approaches in Conflict and Post - Conflict Situations.

UNIAP (n.d.). Partnership against Trafficking.

UNICEF. At a Glance: Cambodia - Statistics. <a href="http://www.unicef.org/infobycountry/cambodia">http://www.unicef.org/infobycountry/cambodia</a> statistics.html/

UNIFEM, the World Bank, ADB, UNDP and DFID/UK. 2004. *A Fair Share for Women: Cambodia Gender Assessment*. Phnom Penh: UNIFEM, WB, ADB, UNDP and DFID/UK.

United States Agency for International Development.

- Addressing Gender Concerns: The Success of the USAID Gender Plan of Action and USAID Country Programs. A Report to the United States Congress by USAID.1999.
- ADS Guide to Gender Integration. nd
- Aftermath: Woman and Woman's Organizations in Post-conflict Cambodia. USAID Evaluation NO. 97, PN-ACG-602. 2000
- Aftermath: Women and Women's Organizations in Postconflict Cambodia. USAID Evaluation Highlights No. 67. Center for Development Information and Evaluation. 2000.
- Education Sector Assessment and Recommendations for Future Programs 2005-2010. April 2005. prepared by Dave Evans.
- Interim Strategic Plan 2002 2005. USAID/Cambodia
- Trafficking in Persons The USAID Strategy for Response. USAID PD-ABX-358. 2003
- UASID/Cambodia Annual Report FY 2004. June, 2004.
- USAID Cambodia Strategy Statement (2005-2010). 2005. USAID/Cambodia.
- USAID/Cambodia. <a href="http://usaid.gov/kh/">http://usaid.gov/kh/</a>
- Women and AIDS: Responding Globally. In Focus. Issue Series 2005. Washington, DC: USAID.

Velasco, Esther. 2002. *The Five-Year Gender Mainstreaming Strategy of the Ministry of Education, Youth and Sports (MoEYS) 2002-2006.* prepared for UNICEF/Sida. Phnom Pehn

Walston, Naomi. 2005. Country Analysis of Family Planning and HIV/AIDS Programs: Cambodia. Phnom Penh: POLICY Project.

Walston, Naomi. 2005. *Challenges and Opportunities for Male Involvement in Reproductive Health in Cambodia*. USAID Policy Project/Cambodia.

WildAid. 2004. Community Agriculture Development Project (CADP) Agriculture Development for Protection of the South West Elephant Corridor, Koh Kong Province, Cambodia, Final Report to USAID.

Women for Prosperity. 2005. Narrative Progress Report – Strengthening and Capacity Building of Woman and Children Focal Points.

Women for Prosperity. 2005. *Progress Report – Strengthening and Capacity Building of Woman's Network.* 

World Bank. 2002. Data Profile, Cambodia.

World Bank. 2005. *Cambodia. Quality Basic Education for All.* Human Development Sector Reports, East Asia and the Pacific Region. Report No. 32619-KH.

World Bank. 2006. "Gender and Disability." http://web.worldbank.org/WBSITE/EXTERNAL/TOPICS/EXTSOCIALPROTECTION/